Case 16-32145 Doc 1 Filed 10/07/16 Entered 10/07/16 14:19:53 Desc Main Document Page 1 of 73

| Fill in this information to identify your case: | |
|---|-------------------------------|
| United States Bankruptey Court for the | |
| United States Bankruptcy Court for the: | |
| Northern District of: Illinois (State) | <u> </u> |
| Case number (if known) | Chapter you are filing under: |
| | Chapter 7 |
| | Chapter 11 |
| | Chapter 12 ✓ Chapter 13 |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part 1: Identify Yourself | | |
|---|----------------------------|---|
| | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. Your full name | Angela | |
| Write the name that is on | First name | First name |
| your government-issued picture identification (for | Middle name | Middle name |
| example, your driver's | Carroll | |
| license or passport | Last name | Last name |
| Bring your picture identification to your meeting with the trustee. | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| 2. All other names you | | |
| have used in the | First name | First name |
| last 8 years | | |
| Include your married or maiden names. | Middle name | Middle name |
| maidernames. | Last name | Last name |
| | First name | First name |
| | Middle name | Middle name |
| | Last name | Last name |
| 3. Only the last 4 digits of your | XXX - XX- 6354 | xxx - xx- |
| digits of your Social Security number or federal | OR | OR |
| Individual Taxpayer Identification | 9 xx - xx- | 9 xx - xx- |
| number (ITIN) | | |

Case 16-32145 Doc 1 Filed 10/07/16 Entered 10/07/16 14:19:53 Desc Main Document Page 2 of 73

| Debtor 1 Angela First Name | Middle Name | Carroll Last Name | Case number (if known) | |
|---|-------------------------------------|------------------------------------|--------------------------------------|-------------------------------|
| FIISLINAITIE | iviiquie Naffle | Lastivanie | | |
| | About Debtor 1: | | About Debtor 2 (Spouse | Only in a Joint Case): |
| 4. Any business names and Employer | I have not used any busine | ess names or EINs. | I have not used any business | s names or EINs. |
| Identification Numbers (EIN) you have used in the | Business name | | Business name | |
| last 8 years | Business name | | Business name | |
| Include trade names and doing business as names | EIN | | EIN | |
| | EIN | | EIN | |
| 5. Where you live | 4211 S Wells St #1 | | If Debtor 2 lives at a different | address: |
| | Number Street | | Number Street | |
| | | | | |
| | Chicago Illinois | 60609 | | |
| | City State | Zip Code | City State | Zip Code |
| | | | | • |
| | Cook | | | |
| | County | | County | |
| | If your mailing address is dif | | If Debtor 2's mailing address is | different from yours, fill it |
| | fill it in here. Note that the coul | rt will send any notices to you at | in here. Note that the court will se | |
| | this mailing address. | | address. | |
| | | | _ | |
| | Number Street | | Number Street | |
| | | | - | |
| | City State | Zin Codo | | 7. 0. 1. |
| | City State | Zip Code | City State | Zip Code |
| 6. Why you are | Check one: | | Check one: | |
| choosing this district to file for | | fore filing this petition, I have | Over the last 180 days befor | |
| bankruptcy | lived in this district longer | • | lived in this district longer th | • |
| | I have another reason. Ex | olain. (See 28 U.S.C. §§ 1408.) | I have another reason. Expla | in. (See 28 U.S.C. §§ 1408.) |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

Case 16-32145 Doc 1 Filed 10/07/16 Entered 10/07/16 14:19:53 Desc Main Document Page 3 of 73

| Debtor 1 Angela | Carroll | Case number | (if known) |
|---|--|---|---|
| First Name | Middle Name Last Name | | |
| Part 2: Tell the Court Abo | out Your Bankruptcy Case | | |
| 7. The chapter of the Bankruptcy Code you are choosing to file under | Check one. (For a brief description of each, see B2010)). Also, go to the top of page 1 and check Chapter 7 Chapter 11 Chapter 12 Chapter 13 | | § 342(b) for Individuals Filing for Bankruptcy (Form |
| 8. How you will pay the fee | court for more details about how y may pay with cash, cashier's checon your behalf, your attorney may I need to pay the fee in installme Individuals to Pay Your Filing Fee is I request that my fee be waived By law, a judge may, but is not recless than 150% of the official pove | rou may pay. Typically, if ck, or money order If you pay with a credit card or ents. If you choose this on Installments (Official For You may request this opequired to, waive your fee, erty line that applies to you so this option, you must | ption, sign and attach the <i>Application for</i> rm 103A). tion only if you are filing for Chapter 7. and may do so only if your income is ur family size and you are unable to pay t fill out the <i>Application to Have the</i> |
| 9. Have you filed for bankruptcy within the last 8 years? | ✓ No. ✓ Yes. District District District | When | Case number Case number |
| 10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | V No. Yes. Debtor District Debtor District | | Relationship to you Case number, if known |
| 11. Do you rent your residence? | No. Go to line 12. ✓ Yes. Has your landlord obtained an eviction ✓ No. Go to line 12. — Yes. Fill out <i>Initial Statement Alt</i> this bankruptcy petition. | | ou want to stay in your residence? It You (Form 101A) and file it with |

Case 16-32145 Doc 1 Filed 10/07/16 Entered 10/07/16 14:19:53 Desc Main Document Page 4 of 73

| Debtor 1 Angela First Name | | Midd | | Carroll Last Name | Case number (if kn | nown) | |
|--|---------------|--|--|--|---|--|--|
| | nv Bus | | es You Own as a S | | | | |
| 12. Are you a sole proprietor of any full- or part-time business? A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. | | No. | Go to Part 4. Name and location of both statements of business, if and statements of business, if an additional statements of business, if an additional s | Street Street | n 11 U.S.C. § 101(27A)) d in 11 U.S.C. § 101(51B) § 101(53A)) | Zip Code | |
| 13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? For a definition of small business debtor, see 11 U.S.C. § 101(51D). | dead opera | llines. If y ations, ca C. § 11 1 No. | ou indicate that you are a ash-flow statement, and a left (1)(B). I am not filing under Chapt Bankruptcy Code. | a small business deb federal income tax re napter 11. ter 11, but I am NOT | ether you are a small busi stor, you must attach your r eturn or if any of these doc a small business debtor a | most recent balance cuments do not exist, and according to the definance currents. | sheet, statement of t, follow the procedure in 11 |
| Part 4: Report if You Ov | vn or | Have A | Any Hazardous Pro | operty or Any P | roperty That Needs | s Immediate Att | tention |
| 14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate | | | What is the hazard? If immediate attention is r Where is the property? | needed, why is it nee | ded? Street | | |
| attention? For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | | | City | State | | Zip Code |

Case 16-32145 Doc 1 Filed 10/07/16 Entered 10/07/16 14:19:53 Desc Main Document Page 5 of 73

Debtor 1 Angela Carroll Case number (if known)

First Name Middle Name Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I filed counseling agency within the 180 days before I filed about credit this bankruptcy petition, and I received a certificate of this bankruptcy petition, and I received a certificate of counseling. completion. completion. Attach a copy of the certificate and the payment plan, if any, Attach a copy of the certificate and the payment plan, if any, The law requires that that you developed with the agency. that you developed with the agency. you receive a briefing about credit I received a briefing from an approved credit I received a briefing from an approved credit counseling agency within the 180 days before I filed counseling agency within the 180 days before I filed counseling before this bankruptcy petition, but I do not have a this bankruptcy petition, but I do not have a you file for certificate of completion. certificate of completion. bankruptcy. You must truthfully check Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment one of the following plan, if any. plan, if any. choices. If you cannot do so, you are I certify that I asked for credit counseling services I certify that I asked for credit counseling services not eligible to file. from an approved agency, but was unable to obtain from an approved agency, but was unable to obtain those services during the 7 days after I made my those services during the 7 days after I made my If you file anyway, request, and exigent circumstances merit a 30-day request, and exigent circumstances merit a 30-day temporary waiver of the requirement. temporary waiver of the requirement. the court can dismiss your case, you will To ask for a 30-day temporary waiver of the requirement, To ask for a 30-day temporary waiver of the requirement, lose whatever filing attach a separate sheet explaining what efforts you made to attach a separate sheet explaining what efforts you made to fee you paid, and obtain the briefing, why you were unable to obtain it before obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances you filed for bankruptcy, and what exigent circumstances your creditors can required you to file this case. required you to file this case. begin collection activities again. Your case may be dismissed if the court is dissatisfied with Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for your reasons for not receiving a briefing before you filed for bankruptcy. bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, the payment plan you developed, if any. If you do not do so, your case may be dismissed. your case may be dismissed. Any extension of the 30-day deadline is granted only for Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me incapable of deficiency that makes me incapable of realizing or making rational decisions realizing or making rational decisions about finances. Disability. My physical disability causes me to be Disability. My physical disability causes me to be unable to participate in a briefing in unable to participate in a briefing in person, by phone, or through the person, by phone, or through the internet, even after I reasonably tried internet, even after I reasonably tried to do so. to do so. Active duty. Active duty. I am currently on active military duty in I am currently on active military duty in a military combat zone. a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of about credit counseling, you must file a motion for waiver of

credit counseling with the court.

credit counseling with the court.

Case 16-32145 Doc 1 Filed 10/07/16 Entered 10/07/16 14:19:53 Desc Main Document Page 6 of 73

| Debtor 1 Angela | | Carroll Case number (if known | n) |
|---|---|---|---|
| Part 6: Answer These Qu | Middle Name Luestions for Reporting Purpos | Last Name SeS | |
| 16. What kind of debts do you have? | 16a. Are your debts primaril 101(8) as "incurred by ar No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primaril obtain money for a busin investment. No. Go to line 16c. Yes. Go to line 17. | y consumer debts? Consumer debts in individual primarily for a personal, failing by business debts? Business debts all less or investment or through the oper ou owe that are not consumer debts of | mily, or household purpose." re debts that you incurred to ation of the business or |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | paid that funds will be availa No. Yes. | er 7. Go to line 18. Do you estimate that after any exempt property is able to distribute to unsecured creditors? | s excluded and administrative expenses are |
| 18. How many creditors do you estimate that you owe? | ✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999 | ☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 10,001-25,000 | 25,001-50,000 50,001-100,000 More than 100,000 |
| 19. How much do you estimate your assets to be worth? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| 20. How much do you estimate your liabilities to be? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| Part 7: Sign Below | | | |
| For you | and correct. If I have chosen to file under (11,12, or 13 of title 11, United choose to proceed under Chap If no attorney represents me ame fill out this document, I have I request relief in accordance I understand making a false st | and I did not pay or agree to pay some ve obtained and read the notice requir with the chapter of title 11, United Stat tatement, concealing property, or obta case can result in fines up to \$250,000 52, 1341, 1519, and 3571. | eed, if eligible, under Chapter 7, vailable under each chapter, and I eone who is not an attorney to help ed by 11 U.S.C. § 342(b). tes Code, specified in this petition. ining money or property by fraud in 0, or imprisonment for up to 20 |

Case 16-32145 Doc 1 Filed 10/07/16 Entered 10/07/16 14:19:53 Desc Main Document Page 7 of 73

| Debtor 1 | Angela | | Carroll | Case number | (if known) |
|----------|---|---|--|---|--|
| | First Name | Middle Name | Last Name | | |
| you are | ur attorney, if e represented are not | eligibility to proceed un the relief available und to the debtor(s) the not | der Chapter 7, 11, 12, er each chapter for whice required by 11 U.S | or 13 of title 11, Unich the person is 3.C. § 342(b) and, i | that I have informed the debtor(s) about United States Code, and have explained eligible. I also certify that I have delivered in a case in which § 707(b)(4)(D) applies, nation in the schedules filed with the |
| repres | ented by an | petition is incorrect. | iomioago aitor air iriq | any mat mo mom | namen in the confedence med with the |
| | y, you do not | . (a/ An ain I lank | | | |
| need to | o file this page. | /s/ Angle Harb | - Debter | Date | 10/7/2016 |
| | | Signature of Attorney for | or Deptor | | MM / DD / YYYY |
| | | | | | |
| | | Angie Harb | | | |
| | | Printed name | | | |
| | | Semrad Law Firm | | | |
| | | Firm name | | | |
| | | 20 S. Clark Street | | | |
| | | Street | | | |
| | | 28th Floor | | | · |
| | | Chicago | | Illinois | 60603 |
| | | City | | State | Zip Code |
| | | Contact phone | | Email address | aharb@semradlaw.com |
| | | | | Illin | nois |
| | | Bar number | | Sta | |

Case 16-32145 Doc 1 Filed 10/07/16 Entered 10/07/16 14:19:53 Desc Main Document Page 8 of 73

| Fill in this inform | Fill in this information to identify your case: | | | | | |
|---------------------------|---|-------------|------------------------------|--|--|--|
| Debtor 1 | Angela First Name | Middle Name | Carroll Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse, if filing |) First Name | Middle Name | Last Name | | | |
| United States B | ankruptcy Court for the: | Northern | District of Illinois (State) | | | |
| Case number (If known) | | | (Glate) | | | |

| Check if this is ar |
|---------------------|
| amended filing |

12/15

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| Part 1: Summarize Your Assets | |
|--|---|
| | Your assets Value of what you own |
| 1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$0.00 |
| 1b. Copy line 62, Total personal property, from Schedule A/B | \$4,000.00 |
| 1c. Copy line 63, Total of all property on Schedule A/B | \$4,000.00 |
| Part 2: Summarize Your Liabilities | |
| | Your liabilities Amount you owe |
| Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$0.00 |
| 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$0.00 |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$22,285.00 |
| Your total liabilities | \$22,285.00 |
| Part 3: Summarize Your Income and Expenses | |
| 4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$2,111.83 |
| 5. Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22, Column A, of Schedule J | \$1,936.00 |
| | |

Case 16-32145 Doc 1 Filed 10/07/16 Entered 10/07/16 14:19:53 Desc Main Document Page 9 of 73

| Deb | tor 1 <u>A</u> | | | Carroll | Case no | umber (if known) | | |
|-------------|----------------|--|--|---|------------------|------------------------------|------------|---|
| | | First Name | Middle Name | Last Name | _ | | | |
| Part | 4: A | nswer These Que | stions for Administra | ative and Statistical Re | cords | | | |
| 6. A | re you | filing for bankruptcy | under Chapters 7, 11, or 1 | 3? | | | | |
| | No. | . You have nothing to re | port on this part of the form. | Check this box and submit this | form to the co | urt with your other schedule | es. | |
| | ✓ Yes | S. | | | | | | |
| 7. W | /hat kii | nd of debt do you ha | ve? | | | | | |
| [| | | | er debts are those incurred by ut lines 8-10 for statistical purp | | | | |
| [| | ur debts are not prima form to the court with y | - | have nothing to report on this p | part of the form | . Check this box and subm | it | |
| | | | r Current Monthly Income m 122B Line 11; OR, Form | e: Copy your total current mont 122C-1 Line 14. | thly income from | m Official | \$2,223.83 | _ |
| 9. | Сору | the following special | categories of claims fron | n Part 4, line 6 of Schedule E | E/F: | | | |
| | From | Part 4 on Schedule E | E/F, copy the following: | | | Total claim | | |
| | 9a. Do | omestic support obligati | ions (Copy line 6a.) | | | \$0.00 | | |
| | 9b. Ta | axes and certain other de | ebts you owe the governmen | t. (Copy line 6b.) | | \$0.00 | | |
| | 9c. Cla | aims for death or perso | nal injury while you were into | exicated. (Copy line 6c.) | | \$0.00 | | |
| | 9d. St | udent loans. (Copy line | 6f.) | | | \$0.00 | | |
| | | | | divorce that you did not report | as | \$0.00 | | |
| | | y claims. (Copy line 6g ebts to pension or profit- | .) sharing plans, and other sir | nilar debts. (Copy line 6h.) | | \$0.00 | | |
| | 9a T a | otal Add lines 9a throu | ah Of | | Γ | 20.02 | | |

Case 16-32145 Doc 1 Filed 10/07/16 Entered 10/07/16 14:19:53 Desc Main Document Page 10 of 73

| Fill in this | information to identify your case | : | | | | | |
|---------------------------------|--|---|---|---|-------------|--|---|
| Debtor 1 | Angela | | | Carroll | | | |
| | First Name | Middle N | Name | Last Name | | | |
| Debtor 2 Spouse, | if filing) First Name | Middle N | Name | Last Name | | | |
| Jnited St | ates Bankruptcy Court for the: | Northern | | District of Illinois | | | |
| Case nun f known) | nber | | | (State) | | | |
| | al Form 106A/B | | | | | | Check if this is an amended filing |
| | dule A/B: Prope | rty | | | | | 12 |
| tegory v sponsik ite your | where you think it fits best. Be ble for supplying correct infor name and case number (if kn | e as complete and mation. If more s own). Answer ev | d accurate space is ne ery questi | | ople are f | iling together, both are rm. On the top of any a | equally dditional pages, |
| | | | | r Other Real Estate You C lence, building, land, or similar | | | |
| . DO YO | No. Go to Part 2 | inable interest in | i ally resid | ience, building, land, or similar | property | : | |
| | Yes. Where is the property? | | | | | | |
| 1.1 | Street address, if available, or o | other description | Singl | the property? Check all that app e-family home | bly. | the amount of any secure | laims or exemptions. Put ed claims on <i>Schedule D:</i> aims Secured by <i>Propert</i> |
| | | | Cond | ex or multi-unit building dominium or cooperative ufactured or mobile home | | Current value of the entire property? | Current value of the portion you own? |
| | Number Street | | | stment property | | Describe the nature of interest (such as fee si | |
| | City State | Zip Code | Time | share r | | the entireties, or a life | |
| | | | one. Debte | s an interest in the property? Cor 1 only or 2 only or 1 and Debtor 2 only ast one of the debtors and another | | Check if this is co (see instructions) | |
| | | | Other in | formation you wish to add abo | | m, such as local | |
| If you | own or have more than one, list h | ere: | | | | | |
| 1.2 | Street address, if available, or o | other description | Singl | the property? Check all that app e-family home | oly. | Do not deduct secured of the amount of any secure Creditors Who Have Cla | ed claims on <i>Schedule D</i> |
| | | | Cond | ex or multi-unit building dominium or cooperative ufactured or mobile home | | Current value of the entire property? | Current value of the portion you own? |
| | Number Street | | Land | stment property | | Describe the nature of | |
| | City State | Zip Code | Time | share r | | interest (such as fee si the entireties, or a life | |
| | | | Who has | s an interest in the property? | Check | Check if this is co (see instructions) | mmunity property |
| | | | | or 1 only | | ш | |
| | | | Debt | or 2 only | | | |
| | | | | or 1 and Debtor 2 only | | | |
| | | | At lea | ast one of the debtors and another | | | |
| | | | | formation you wish to add abo | ut this ite | m, such as local | |

Case 16-32145 Doc 1 Filed 10/07/16 Entered 10/07/16 14:19:53 Desc Main Document Page 11 of 73

| Debtor 1 | Angela First Name | Middle Nesse | Carroll Last Name | Case number | (if known) | |
|--|--|---|---|-------------------|--|---|
| 1.3Stre | et address, if available, or other | | What is the property? Check all that app Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home | oly. | the amount of any secur | claims or exemptions. Put ed claims on Schedule D: eaims Secured by Property. Current value of the portion you own? |
| Nun | | Zip Code | Land Investment property Timeshare Other Who has an interest in the property? C | Check one. | Describe the nature of interest (such as fee s the entireties, or a life Check if this is co (see instructions) | imple, tenancy by estate), if known. mmunity property |
| 2. Add | the dollar value of the porti | | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add abo property identification number: all of your entries from Part 1, including | | | |
| you ha | ve attached for Part 1. Write | that number he | Pre | | | |
| Do you ov you own th 3. Cars, va | at someone else drives. If you ins, trucks, tractors, sport utility | quitable interest lease a vehicle, a | in any vehicles, whether they are regist lso report it on Schedule G: Executory Cont cycles | | | |
| 3.1 | Make Model: Year: | | Who has an interest in the propert one. Debtor 1 only | t y? Check | the amount of any secur | claims or exemptions. Put ed claims on <i>Schedule D:</i> aims Secured by Property. |
| | Approximate mileage: Other information: | | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and and Check if this is community proinstructions) | | Current value of the entire property? | Current value of the portion you own? |
| 3.2 | Make Model: Year: | | Who has an interest in the propert one. Debtor 1 only | t y? Check | the amount of any secur | claims or exemptions. Put ed claims on <i>Schedule D:</i> aims Secured by <i>Property</i> . |
| | Approximate mileage: Other information: | | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and and Check if this is community pro | | Current value of the entire property? | Current value of the portion you own? |
| | | | instructions) | | | |

Case 16-32145 Doc 1 Filed 10/07/16 Entered 10/07/16 14:19:53 Desc Main Document Page 12 of 73

| Debtor 1 | Angela | Carroll Case number | i (ii kriowri) | |
|-----------------|--|--|---|---|
| | First Name Middle | Name Last Name | | |
| 3.3 | Make | Who has an interest in the property? Check | | laims or exemptions. Put |
| | Model: | one. | | ed claims on Schedule D: |
| | Year: | Debtor 1 only | Creditors vvno Have Cla | aims Secured by Property. |
| | Approximate mileage: | Debtor 2 only | Current value of the | Current value of the |
| | Other information: | Debtor 1 and Debtor 2 only | entire property? | portion you own? |
| | | At least one of the debtors and another | | |
| | | Check if this is community property (see instructions) | | |
| 3.4 | | Who has an interest in the property? Check | | laims or exemptions. Put |
| | Model: Year: | one. | | ed claims on Schedule D: aims Secured by Property. |
| | Approximate mileage: | Debtor 1 only | Creditors willor lave Cit | янть зеситей бу гторену. |
| | ·· - | Debtor 2 only | Current value of the | Current value of the |
| | Other information: | Debtor 1 and Debtor 2 only | entire property? | portion you own? |
| | | At least one of the debtors and another | | |
| | | Check if this is community property (see | | |
| | mples: Boats, trailers, motors, personal v No | instructions) and other recreational vehicles, other vehicles, and accewatercraft, fishing vessels, snowmobiles, motorcycle accessori | | |
| Exa | mples: Boats, trailers, motors, personal v No Yes | and other recreational vehicles, other vehicles, and accessoring watercraft, fishing vessels, snowmobiles, motorcycle accessoring the control of the control | ies | |
| Exa | mples: Boats, trailers, motors, personal v No Yes Make | and other recreational vehicles, other vehicles, and accessoring watercraft, fishing vessels, snowmobiles, motorcycle accessoring with the property? Check | Do not deduct secured c | laims or exemptions. Put ed claims on Schedule D: |
| Exa | mples: Boats, trailers, motors, personal v No Yes | and other recreational vehicles, other vehicles, and accessoring watercraft, fishing vessels, snowmobiles, motorcycle accessoring the control of the control | Do not deduct secured countries amount of any secure | laims or exemptions. Put ed claims on Schedule D: aims Secured by Property. |
| Exa | mples: Boats, trailers, motors, personal v No Yes Make Model: | and other recreational vehicles, other vehicles, and accessoring watercraft, fishing vessels, snowmobiles, motorcycle accessoring with the property? Check one. | Do not deduct secured of the amount of any secure Creditors Who Have Cla | ed claims on Schedule D: aims Secured by Property. |
| Exa | mples: Boats, trailers, motors, personal v No Yes Make Model: Year: | watercraft, fishing vessels, snowmobiles, motorcycle accessori Who has an interest in the property? Check one. Debtor 1 only | Do not deduct secured countries amount of any secure | ed claims on Schedule D: |
| Exa | mples: Boats, trailers, motors, personal v No Yes Make Model: Year: Approximate mileage: | watercraft, fishing vessels, snowmobiles, motorcycle accessori Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only | Do not deduct secured of the amount of any secure Creditors Who Have Cla | ed claims on Schedule D: aims Secured by Property. Current value of the |
| Exa | mples: Boats, trailers, motors, personal v No Yes Make Model: Year: Approximate mileage: | watercraft, fishing vessels, snowmobiles, motorcycle accessorion Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | Do not deduct secured of the amount of any secure Creditors Who Have Cla | ed claims on Schedule D: aims Secured by Property. Current value of the |
| Exa ✓ 4.1 | mples: Boats, trailers, motors, personal v No Yes Make Model: Year: Approximate mileage: | watercraft, fishing vessels, snowmobiles, motorcycle accessorions Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see | Do not deduct secured of the amount of any secure Creditors Who Have Cle Current value of the entire property? | ed claims on Schedule D: aims Secured by Property. Current value of the |
| Exa ✓ 4.1 | mples: Boats, trailers, motors, personal of No Yes Make Model: Year: Approximate mileage: Other information: Make Model: | watercraft, fishing vessels, snowmobiles, motorcycle accessorions Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) | Do not deduct secured of the amount of any secure Creditors Who Have Classification Current value of the entire property? Do not deduct secured of the amount of any secure | ed claims on Schedule D: aims Secured by Property. Current value of the portion you own? claims or exemptions. Put ed claims on Schedule D: |
| Exa ✓ 4.1 | mples: Boats, trailers, motors, personal value No Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year: | watercraft, fishing vessels, snowmobiles, motorcycle accessories watercraft, fishing vessels, snowmobiles, fishing v | Do not deduct secured of the amount of any secure Creditors Who Have Classification Current value of the entire property? Do not deduct secured of the amount of any secure | ed claims on Schedule D: aims Secured by Property. Current value of the portion you own? claims or exemptions. Put |
| Exa ✓ 4.1 | mples: Boats, trailers, motors, personal of No Yes Make Model: Year: Approximate mileage: Other information: Make Model: | watercraft, fishing vessels, snowmobiles, motorcycle accessorion Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. | Do not deduct secured of the amount of any secure Creditors Who Have Classification Current value of the entire property? Do not deduct secured of the amount of any secure | ed claims on Schedule D: aims Secured by Property. Current value of the portion you own? claims or exemptions. Put ed claims on Schedule D: |
| Exa ✓ 4.1 | mples: Boats, trailers, motors, personal value No Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year: | watercraft, fishing vessels, snowmobiles, motorcycle accessorions Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only | Do not deduct secured of the amount of any secure Creditors Who Have Classification Current value of the entire property? Do not deduct secured of the amount of any secure Creditors Who Have Classifications | ed claims on Schedule D: aims Secured by Property. Current value of the portion you own? claims or exemptions. Put ed claims on Schedule D: aims Secured by Property. |
| Exa ✓ 4.1 | Make Model: Year: Approximate mileage: Make Model: Year: Approximate mileage: Make Model: Year: Approximate mileage: | watercraft, fishing vessels, snowmobiles, motorcycle accessories watercraft, fishing vessels, snowmobiles, snowmobiles, fishing vessels, snowmobiles, fishing vessels, snow | Do not deduct secured of the amount of any secure Creditors Who Have Classification Current value of the entire property? Do not deduct secured of the amount of any secure Creditors Who Have Classification Current value of the | ed claims on Schedule D: aims Secured by Property. Current value of the portion you own? claims or exemptions. Put ed claims on Schedule D: aims Secured by Property. Current value of the |

Case 16-32145 Doc 1 Filed 10/07/16 Entered 10/07/16 14:19:53 Desc Main Document Page 13 of 73

| Debtor 1 | | Carroll | Case number (if known) | |
|------------------------|----------------------------------|--|------------------------------|---|
| | First Name | Middle Name Last Name | | |
| Part 3: | Describe \ | our Personal and Household Items | | |
| Do you | ı own or ha | ave any legal or equitable interest in any of the fo | llowing items? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | | and furnishings liances, furniture, linens, china, kitchenware | | |
| = | Describe | used furniture | | \$600.00 |
| 7. Elect Examp | | s and radios; audio, video, stereo, and digital equipment; computers, | , printers, scanners; music | |
| ✓ Yes. [| Describe | tv, cellphone | | \$650.00 |
| | • | ue and figurines; paintings, prints, or other artwork; books, pictures, or c in, or baseball card collections; other collections, memorabilia, colle | | |
| Yes. [| Describe | | | |
| - | les: Sports, ph | orts and hobbies otographic, exercise, and other hobby equipment; bicycles, pool tables; carpentry tools; musical instruments | es, golf clubs, skis; canoes | |
| ✓ No | | | | |
| Yes. [| Describe | | | |
| ✓ No | | es, shotguns, ammunition, and related equipment | |] |
| | | clothes, furs, leather coats, designer wear, shoes, accessories | | |
| ∐ No | S | | | 1 |
| ✓ Yes. I | Describe | used clothing | | \$150.00 |
| 12. Jew Examp | • | ewelry, costume jewelry, engagement rings, wedding rings, heirloom er | jewelry, watches, gems, | |
| ✓ Yes. [| Describe | used jewelry | | \$100.00 |
| | n-farm animal bles: Dogs, cat | s, birds, horses | | 9100.00 |
| ✓ No | | | | |
| Yes. [| Describe | | | |
| 14. Any ✓ No | other persor | nal and household items you did not already list, including any | health aids you did not list | |
| | Describe | | | |
| | العلم طعلا | lus of all of your entries from Port 2 including any entries from | nagoo you bayo attoahad | |
| | | lue of all of your entries from Part 3, including any entries for pumber here | | <u>\$1500.00</u> |

Case 16-32145 Doc 1 Filed 10/07/16 Entered 10/07/16 14:19:53 Desc Main Document Page 14 of 73

| Den | Tiret Nome | Middle Name | Last Name | Case number (ii known) | |
|------|--|--|--------------------------------------|---------------------------------|--|
| Part | First Name Pescribe Your | Financial Assets | Last Name | | |
| | | any legal or equitable int | erest in any of the follow | ving? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | ✓ No | e in your wallet, in your home, in a | | | |
| 17. | Deposits of money Examples: Checking, sa | avings, or other financial accounts stitutions. If you have multiple acco | ; certificates of deposit; shares in | | |
| | | 17.1. Checking account: | mb financial | | \$2000.00 |
| | | 17.2. Checking account: | | | |
| | | 17.3. Savings account: | | | <u> </u> |
| | | 17.4. Savings account: | | | |
| | | 17.5. Certificates of deposit: | | | |
| | | 17.6. Other financial account: | | | |
| | | 17.7. Other financial account: | | | |
| | | 17.8. Other financial account: | | | |
| | | 17.9. Other financial account: | | | |
| 18. | | , or publicly traded stocks investment accounts with brokerag | ge firms, money market accounts | | |
| | ✓ No Yes | Institution or issuer name: | | | |
| | | | | | |
| 19. | Non-publicly traded s an LLC, partnership, | and joint venture | ated and unincorporated busin | esses, including an interest in | |
| | Yes. Give specific information about them | Name of entity | | % of ownership: | |
| | | _ | | | |
| | | | | | |

Case 16-32145 Doc 1 Filed 10/07/16 Entered 10/07/16 14:19:53 Desc Main Document Page 15 of 73

| Debt | tor 1 | Angela | | Carroll | Case number (if known) | |
|------|------------|------------------------|--|---|---------------------------------------|----------|
| | | First Name | Middle Name | Last Name | | |
| 20. | Neg Non | otiable instruments in | orate bonds and other negotia actude personal checks, cashiers' ants are those you cannot transfer t Issuer name: | checks, promissory notes, | and money orders. | |
| 21. | Exa | No | | thrift savings accounts, or Institution name: | other pension or profit-sharing plans | |
| | | | 404(k) or similar plan. | | | |
| | | separately. | 401(k) or similar plan: | | | |
| | | | Pension plan: | | | |
| | | | IRA: | | | |
| | | | Retirement account: | | | |
| | | | | | | |
| | | | Keogh: | = | | . ——— |
| | | | Additional account: | | | |
| | | | Additional account: | | | |
| 22. | You Exa | | orepayments leposits you have made so that you vith landlords, prepaid rent, public | | | |
| | ✓ | Yes | Electric: | | | |
| | | | Gas: | | | |
| | | | Heating oil: | | | |
| | | | - | | | \$500.00 |
| | | | Security deposit on rental unit: | security deposit on rental | | |
| | | | Prepaid rent: | - | | . ——— |
| | | | Telephone: | | | . ——— |
| | | | Water: | | | |
| | | | Rented furniture: | | | |
| | | | Other: | | | |
| 23. | Ann | uities (A contract for | a periodic payment of money to y | ou, either for life or for a nui | mber of years) | • |
| | ✓ | No Yes | Issuer name and description: | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

Case 16-32145 Doc 1 Filed 10/07/16 Entered 10/07/16 14:19:53 Desc Main Document Page 16 of 73

| Debt | or 1 Angela First Name | Middl | e Name | Carroll Last Name | Case number (if known) | _ |
|------|--|---|--------------------------|------------------------------|--|--|
| 24. | Interests in a | | count in a qualified | | er a qualified state tuition program | |
| | No Yes | Institution name and descri | ption. Separately file t | he records of any interests | s.11 U.S.C. § 521(c): | |
| | | | | | | |
| 25. | | able or future interests in properties or succession of the contract of t | property (other tha | n anything listed in line | 1), and rights or powers | |
| | ✓ No | | | | | 7 |
| | Yes. Desc | ribe | | | | |
| 26. | | rights, trademarks, trade rnet domain names, websit | | | ments | |
| | ✓ No Yes. Desc | ribe | | | | 7 |
| 27. | Licenses fran | nchises, and other genera | al intangibles | | | 1 |
| | | | | sociation holdings, liquor l | icenses, professional licenses | |
| | Yes. Desc | ribe | | | | |
| | <u> </u> | | | | | |
| Mor | ney or prope | erty owed to you? | | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | ney or prope Tax refunds ov | | | | | portion you own? |
| | | | | | | portion you own? Do not deduct secured |
| | Tax refunds ov | | | | Federal: | portion you own? Do not deduct secured |
| | Tax refunds ov No Yes. Give s about you a | wed to you specific information them, including whether lready filed the returns | | | Federal: State: | portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax refunds ov No Yes. Give s about you a and th | specific information t them, including whether lready filed the returns ne tax years | | | | portion you own? Do not deduct secured claims or exemptions. \$0.00 |
| 28. | Tax refunds on No Yes. Give s about you a and th Family suppor Examples: Past | wed to you specific information t them, including whether lready filed the returns he tax years | pousal support, child s | support, maintenance, dive | State: | portion you own? Do not deduct secured claims or exemptions. \$0.00 |
| 28. | Tax refunds ov No Yes. Give s about you a and th Family suppor Examples: Past | wed to you specific information them, including whether lready filed the returns he tax years t due or lump sum alimony, s | spousal support, child s | support, maintenance, dive | State: Local: Droce settlement, property settlement | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds ov No Yes. Give s about you a and th Family suppor Examples: Past | wed to you specific information t them, including whether lready filed the returns he tax years | pousal support, child | support, maintenance, dive | State: Local: | portion you own? Do not deduct secured claims or exemptions. \$0.00 |
| 28. | Tax refunds ov No Yes. Give s about you a and th Family suppor Examples: Past | wed to you specific information them, including whether lready filed the returns he tax years t due or lump sum alimony, s | pousal support, child s | support, maintenance, dive | State: Local: Drice settlement, property settlement Alimony: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds ov No Yes. Give s about you a and th Family suppor Examples: Past | wed to you specific information them, including whether lready filed the returns he tax years t due or lump sum alimony, s | spousal support, child s | support, maintenance, dive | State: Local: Drice settlement, property settlement Alimony: Maintenance: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds ov No Yes. Give s about you a and th Family suppor Examples: Past | wed to you specific information them, including whether lready filed the returns he tax years t due or lump sum alimony, s | spousal support, child s | support, maintenance, dive | State: Local: Drice settlement, property settlement Alimony: Maintenance: Support: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 29. | Tax refunds on ✓ No Yes. Give s about you a and th Family suppor Examples: Past ✓ No Yes. Give s Other amounts Examples: Unpa | specific information them, including whether lready filed the returns he tax years t due or lump sum alimony, s specific information | nce payments, disabilit | y benefits, sick pay, vacati | State: Local: Divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 29. | Tax refunds on No Yes. Give s about you a and th Family suppor Examples: Past No Yes. Give s Other amounts Examples: Unpa | specific information them, including whether lready filed the returns he tax years t due or lump sum alimony, s specific information | nce payments, disabilit | y benefits, sick pay, vacati | State: Local: Divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 29. | Tax refunds on ✓ No Yes. Give s about you a and th Family suppor Examples: Past ✓ No Yes. Give s Other amounts Examples: Unpa | specific information them, including whether lready filed the returns he tax years t due or lump sum alimony, s specific information | nce payments, disabilit | y benefits, sick pay, vacati | State: Local: Divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |

Case 16-32145 Doc 1 Filed 10/07/16 Entered 10/07/16 14:19:53 Desc Main Document Page 17 of 73

| Deb | tor 1 Angela | Carroll | Case number (if known) | |
|------|--|--------------------------------------|---|--|
| | First Name Middle Name | Last Name | | |
| 31. | Interests in insurance policies Examples: Health, disability, or life insurance; heal | th savings account (HSA); credit, ho | meowner's, or renter's insurance | |
| | Yes. Name the insurance company of each policy and list its value | Company name: | Beneficiary: | Surrender or refund value: |
| 32. | Any interest in property that is due you from s If you are the beneficiary of a living trust, expect pr property because someone has died. No Yes. Describe | | r are currently entitled to receive | |
| 33. | Claims against third parties, whether or not your Examples: Accidents, employment disputes, insurative No | | lemand for payment | |
| 34. | Other contingent and unliquidated claims of to set off claims No Yes. Describe | every nature, including countercl | aims of the debtor and rights | |
| 35. | Any financial assets you did not already list | | | |
| 36. | Yes. Describe Add the dollar value of all of your entries from | | | \$2500.00 |
| | for Part 4. Write that number here | | | |
| Part | • | | | n Part 1. |
| 37. | Do you own or have any legal or equitable inte | erest in any business-related prop | erty? | |
| | ✓ No. Go to Part 6. Yes. Go to line 38. | | pe Di | urrent value of the ortion you own? o not deduct secured claims exemptions |
| 38. | Accounts receivable or commissions you alread | ady earned | | |
| | Yes. Describe | | | |
| 39. | Office equipment, furnishings, and supplies Examples: Business-related computers, software, | modems, printers, copiers, fax mach | ines, rugs, telephones, desks, chairs, electror | nic devices |
| | ✓ No ☐ Yes. Describe | | | |
| | | | | |

Case 16-32145 Doc 1 Filed 10/07/16 Entered 10/07/16 14:19:53 Desc Main Document Page 18 of 73

| Deb | tor 1 | Angela | **** | Carroll | Case number (if known) | |
|--------------|----------|-------------------------------------|--|---|---------------------------------|---|
| 40. | Mac | First Name chinery, fixtures, eq | Middle Name uuipment, supplies vou u | Last Name use in business, and tools of ye | our trade | |
| .5. | _ | No | impinoni, cappiloo you t | | | |
| | | Yes. Describe | | | | 7 |
| | | | | | | |
| 41. | Inve | entory | | | | |
| | _ | No | | | | |
| | Ħ | Yes. Describe | | | | 1 |
| | | | | | | |
| 42. | Inte | rests in partnersh | ips or joint ventures | | | |
| | | No | | | | |
| | _ | Yes. Give specific | | Name of entity: | % of ownership: | |
| | | information about | | | | |
| | | them | | | | <u> </u> |
| | | | | | | |
| 43. (| Custo | omer lists, mailing | lists, or other compilati | ons | | _ |
| | ✓ | No | | | | |
| | | Yes. Do your lists in | clude personally identifiab | le information (as defined in 11 U. | .S.C. § 101(41A))? | |
| | | ☐ No | | | | |
| | | Yes. Desci | ribe | | | |
| 44. | Any | business-related | property you did not alre | ady list | | |
| | _ | No | | • | | |
| | 百 | Yes. Give specific | | | | |
| | | information | | | | |
| | | | | | | <u> </u> |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | art 5, including any entries for | | |
| IOI F | | _ | | | | |
| Part | | | rarm- and Commeron interest in farmland, list it | | erty You Own or Have an Interes | t In. |
| 46. | Do | you own or have a | ny legal or equitable into | erest in any farm- or commerci | ial fishing-related property? | |
| | V | No. Go to Part 7. | | | | Current value of the |
| | | Yes. Go to line 47. | | | | portion you own? Do not deduct secured |
| | | | | | | claims |
| 47. | Far | m animals | | | | or exemptions |
| | | | ultry, farm-raised fish | | | |
| | ✓ | No | | | | |
| | | Yes. Describe | | | | |
| | | | | | | Д |

Case 16-32145 Doc 1 Filed 10/07/16 Entered 10/07/16 14:19:53 Desc Main Document Page 19 of 73

| Debt | or 1 <u>Ar</u> | | | Carroll | Case number (if known) | |
|----------------|----------------|----------------------|---|--------------------------|------------------------------|-------------|
| | | rst Name | Middle Name | Last Name | | |
| 48. | Crops | s-either growing | or harvested | | | |
| | ✓ No | 0 | | | | |
| | ☐ Ye | es. Describe | | | | |
| | | | | | | |
| 40 | | and fishing agui | mant implements machines, fixt | and table of trade | | |
| 49. | Farm a | and fishing equi | pment, implements, machinery, fixt | ures, and tools of trade | | |
| | ✓ No | 0 | | | | |
| | ☐ Ye | es. Describe | | | | |
| | | | | | | |
| 50. | Farm : | and fishing sum | olies, chemicals, and feed | | | |
| 00. | _ | | ones, one modis, and reed | | | |
| | NO NO | | | | | |
| | ∐ Ye | es. Describe | | | | |
| | | | | | | |
| 51. | Any fa | arm- and comme | rcial fishing-related property you did | d not already list | | |
| | ✓ No | 0 | | | | |
| | | es. Describe | | | | |
| | ш. | oo. Decombe | | | | |
| | | | | | | |
| 52. Ad | dd the | dollar value of a | II of your entries from Part 6, includi | ng any entries for pages | you have attached | |
| | | | here | | | |
| | | | | | | |
| | | | | | | |
| Part | 7: De | escribe All Pr | operty You Own or Have an I | nterest in That You [| Oid Not List Above | |
| | | | perty of any kind you did not alread | | | |
| | | | s, country club membership | • | | |
| | ✓ No | 0 | | | | |
| | | es. Give specific | | | | |
| | | formation | | | | |
| | | | | | | |
| | | | | | | |
| 54 Ar | dd the (| dollar value of a | Il of your entries from Part 7. Write the | hat number here | • | |
| O-1. / 1. | uu tiic (| donar varac or a | in or your chance from Fait 7. Write a | | | |
| | | | | | | |
| | | | | | | |
| Part 8 | 8: Li | st the Totals | of Each Part of this Form | | | |
| 55 P | Part 1 · T | Total real estate | line 2 | | • | |
| 00.1 | u | · Otal · Oal ootalo, | | | - | |
| 56. p | art 2 to | otal vehicles, line | e 5 | | | |
| _ | | | nd household items, line 15 | ¢1500.00 | | |
| | | - | | \$1500.00 | | |
| 58. P a | art 4: I | otal financial as | sets, line 36 | \$2500.00 | | |
| 59. P | Part 5: 1 | Total business-re | elated property, line 45 | | | |
| 60. P | art 6: 1 | Total farm- and f | ishing-related property, line 52 | | • | |
| | | | | | | |
| ο1. Ρ | art /: I | iotai otner prop | erty not listed, line 54 | | <u> </u> | |
| 62. T | otal pe | ersonal property. | Add lines 56 through 61 | \$4000.00 | | + \$4000.00 |
| | | | | | Copy personal property total | |
| | | | | | | \$4000.00 |
| 63. T c | otal of a | all property on S | Schedule A/B. Add line 55 + line 62 | | | |

Case 16-32145 Doc 1 Filed 10/07/16 Entered 10/07/16 14:19:53 Desc Main Document Page 20 of 73

| Fill in this information to identify your case: | | | | | | |
|---|------------|-------------|-----------------------------|--|--|--|
| Debtor 1 | Angela | Carroll | | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse, if filing | First Name | Middle Name | Last Name | | | |
| United States Bankruptcy Court for the: | | Northern | District of Illinois(State) | | | |
| Case number (If known) | | | (Oldio) | | | |

Official Form 106C

Check if this is an amended filing

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Par | Part 1: Identify the Property You Claim as Exempt | | | | | | | |
|-----|--|--|---|------------------------------------|--|--|--|--|
| 1. | You are claiming state and federal nonb You are claiming federal exemptions. 1 | exemptions are you claiming? Check one only, even if your spouse is filling with you. siming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) siming federal exemptions. 11 U.S.C. § 522(b)(2) rty you list on Schedule A/B that you claim as exempt, fill in the information below. | | | | | | |
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own Copy the value from Schedule A/B | Amount of the exemption you claim Check only one box for each exemption. | Specific laws that allow exemption | | | | |
| | Brief description: used clothing Line from Schedule A/B: 11 | \$150.00 | \$150.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(a) | | | | |
| | Brief description: used jewelry Line from Schedule A/B: 12 | \$100.00 | \$100.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) | | | | |
| 3. | Are you claiming a homestead exemptio (Subject to adjustment on 4/01/19 and every No Yes. Did you acquire the property covere No Yes | 3 years after that for ca | | | | | | |

Case 16-32145 Doc 1 Filed 10/07/16 Entered 10/07/16 14:19:53 Desc Main Document Page 21 of 73

| btor 1 Angela | | Carroll | Case number (if known) | |
|---|--|-----------------------------------|------------------------------------|------------------------------------|
| | lle Name | Last Name | | |
| t2: Additional Page | | | | |
| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amount of the exe | • | Specific laws that allow exemption |
| | Copy the value from Schedule A/B | | | |
| Brief | # 000.00 | _ | | 735 ILCS 5/12-1001(b) |
| description: | \$600.00 | ✓ | \$600.00 | |
| used furniture Line from Schedule A/B: 06 | | 100% of fair mar applicable statu | ket value, up to any tory limit | - |
| Brief | | | | 735 ILCS 5/12-1001(b) |
| description: | \$500.00 | ✓ | \$500.00 | |
| security deposit on rental | | | ket value, up to any | = |
| Line from Schedule A/B: 22 | | applicable statu | tory limit | |
| Brief | | | | 735 ILCS 5/12-1001(b) |
| description: | \$2,000.00 | ✓ | \$2.000.00 | |
| mb financial | | 100% of fair mar | rket value, up to any | _ |
| Line from Schedule A/B:17 | | applicable statu | | |
| Brief | ^ | | | 735 ILCS 5/12-1001(b) |
| description: | \$650.00 | ✓ | \$650.00 | |
| tv, cellphone | | 100% of fair mar | ket value, up to any | - |
| Line from | | applicable statu | | |

Case 16-32145 Doc 1 Filed 10/07/16 Entered 10/07/16 14:19:53 Desc Main Document Page 22 of 73

| | | | | <u></u> | | |
|-------|---|-----------------------------------|--|----------------------------|----------|------------------------------------|
| Filli | in this information to identify your cas | se: | | | | |
| Deb | otor 1 Angela | | Carroll | | | |
| | First Name | Middle Name | Last Name | | | |
| Deb | otor 2 | | | | | |
| (Spo | ouse, if filing) First Name | Middle Name | Last Name | | | |
| Unit | ted States Bankruptcy Court for the: | Northern | District of Illinois | | | |
| | | | (State) | | | |
| | se number nown) | | | | | |
| ` | ficial Form 106D | | | | | Check if this is ar amended filing |
| Sc | hedule D: Credi | itors Who Ha | ve Claims Secu | red by Pro | | 12/15 |
| spac | s complete and accurate as poss te is needed, copy the Additional case number (if known). | | | | | |
| 1. | Do any creditors have claims see | cured by your property? | | | | |
| | No. Check this box and submit | t this form to the court with you | ur other schedules. You have nothin | g else to report on this f | orm. | |
| | Yes. Fill in all of the information | n below. | | | | |
| Par | t1: List All Secured Claim | s | | | | |
| _ | List all secured claims. If a credit | or has more than one secure | ed claim, list the creditor separately | Column A | Column B | 0.4 |
| 2. | | | | | | Column C |

Case 16-32145 Doc 1 Filed 10/07/16 Entered 10/07/16 14:19:53 Desc Main Document Page 23 of 73

| Filli | in this inform | ation to identify your cas | e: | | | | | |
|--|---|--|---|--|--|--|---|--|
| Deb | otor 1 | Angela | | Carroll | | | | |
| | | First Name | Middle Name | Last Name | | | | |
| | otor 2 | | N.C. I. II. N.I | | | | | |
| (Sp) | ouse, it tiling | First Name | Middle Name | Last Name | | | | |
| Unit | ted States Ba | ankruptcy Court for the: | Northern | District of Illinois | | | | |
| Can | se number | | | (State) | | | | |
| | nown) | | | | | | | |
| Off | ficial F | orm 106E/F | | | | Ch | eck if this is ar | n amended filing |
| | | | ditoro Who | Hava IInaa | oured Claims | | | |
| <u> </u> | neau | ile E/F: Cre | caltors who | nave unse | cured Claims | | | 12/15 |
| party 106A that entri knov | / to any exe VB) and on are listed in es in the bo vn). | cutory contracts or un Schedule G: Executor Schedule D: Creditor oxes on the left. Attach | expired leases that could y Contracts and Unexpire s Who Hold Claims Secu | result in a claim. Also lised Leases (Official Form red by Property. If more to this page. On the top of the t | s and Part 2 for creditors with st executory contracts on <i>Sch</i> 106G). Do not include any cre space is needed, copy the Pa of any additional pages, write | nedule A/B. editors with art you nee | : Property (On a partially sec ed, fill it out, n | fficial Form cured claims number the |
| 1. | | | secured claims against ye | | | | | |
| ٠. | | o to Part 2. | iscoured ciairis against y | ou: | | | | |
| | Yes. | | | | | | | |
| 2. | listed, iden much as po Continuation | ify what type of claim it is ossible, list the claims in a on Page of Part 1. If more | s. If a claim has both priority | and nonpriority amounts, I g to the creditor's name. If particular claim, list the oth | | n priority and | d nonpriority ar | mounts. As |
| | | | | | | Total claim | Priority amount | Nonpriority amount |

Case 16-32145 Doc 1 Filed 10/07/16 Entered 10/07/16 14:19:53 Desc Main Document Page 24 of 73

| Debte | | rroll Case number (if known) t Name | |
|--------|--|---|------------------|
| Part : | | | |
| | | | |
| 3. | Do any creditors have nonpriority unsecured claims against you No. You have nothing to report in this part. Submit this form to the | | |
| | Yes. | s court with your other schedules. | |
| | | order of the creditor who holds each claim. If a creditor has more the | han and priority |
| | | claim listed, identify what type of claim it is. Do not list claims already inc | |
| | If more than one creditor holds a particular claim, list the other creditor | rs in Part 3.lf you have more than four priority unsecured claims fill out the | |
| | Page of Part 2. | | |
| | | | Total claim |
| 4.1 | City of Chicago Parking Nonpriority Creditor's Name | Last 4 digits of account number | \$3,800.00 |
| | 121 N. LaSalle St # 107A | When was the debt incurred?n/a | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | ChicagoIllinois60602CityStateZip Code | Unliquidated | |
| | Who incurred the debt? Check one. | Disputed | |
| | ✓ Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | Student loans | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce | |
| | At least one of the debtors and another | that you did not report as priority claims | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar | |
| | Is the claim subject to offset? | debts ✓ Other. Specify parking tickets | |
| | No | <u> </u> | |
| | Yes | | |
| 4.2 | ComEd Nonpriority Creditor's Name | Last 4 digits of account number | \$1,200.00 |
| | 3 Lincoln Center | When was the debt incurred?n/a | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | |
| | Bankruptcy Section | Contingent | |
| | Oakbrook Terrace Illinois 60181 City State Zip Code | Unliquidated | |
| | Who incurred the debt? Check one. | Disputed | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | Student loans | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce | |
| | At least one of the debtors and another | that you did not report as priority claims | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar | |
| | Is the claim subject to offset? | debts ✓ Other. Specify utility | |
| | ✓ No | | |
| | Yes | | |
| 4.3 | COMMONWEALTH FINANCIAL Nonpriority Creditor's Name | Last 4 digits of account number15N1 | \$433.00 |
| | 245 Main Śt | When was the debt incurred? 3/1/2016 | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | Scranton Pennsylvania 18519 City State Zip Code | Unliquidated | |
| | Who incurred the debt? Check one. | Disputed | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | Student loans | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce | |
| | At least one of the debtors and another | that you did not report as priority claims | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | √ 001 Collection; Collecting for | |
| | ✓ No | ORIGINAL CREDITOR: Other. Specify MEDICAL PAYMENT DATA | |
| | Yes | THE TOTAL PROPERTY. | |

Entered 10/07/16 14:19:53 Desc Main Case 16-32145 Doc 1 Filed 10/07/16 Page 25 of 73 Document

Debtor 1 Angela Carroll Case number (if known) First Name Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page Part 2: After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** CONVERGENT OUTSOURCING 4.4 \$1,574.00 Last 4 digits of account number _ Nonpriority Creditor's Name Po Box 9004 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent 98057 Renton Washington Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? 001 Collection; Collecting for **✓** No Other. Specify ORIGINAL CREDITOR: SPRINT Yes **CREDIT ACCEPTANCE** 4.5 \$8,962.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 513 When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Michigan 48037 Southfield City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt judgment Other. Specify Is the claim subject to offset? **✓** No Yes **DIVERSIFIED** \$1,932.00 Last 4 digits of account number Nonpriority Creditor's Name Po Box 1391 When was the debt incurred? 12/1/2014 Number Street As of the date you file, the claim is: Check all that apply. Contingent 48195 Southgate Michigan Unliquidated State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? $\overline{}$ Collection; Collecting for **✓** No

Yes

Other. Specify

ORIGINAL CREDITOR: 11 AT T

WIRELESS

Entered 10/07/16 14:19:53 Case 16-32145 Doc 1 Filed 10/07/16 Page 26 of 73 Document

Debtor 1 Angela Carroll Case number (if known) First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.7 DIVERSIFIED \$51.00 Last 4 digits of account number Nonpriority Creditor's Name Po Box 1391 When was the debt incurred? 5/1/2016 Street Number As of the date you file, the claim is: Check all that apply. Contingent 48195 Southgate Michigan Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? 001 Collection; Collecting for **✓ ✓** No ORIGINAL CREDITOR: 11 Other. Specify COMCAST Yes ENHANCED RECOVERY CO L 4.8 \$1,932.00 Last 4 digits of account number Nonpriority Creditor's Name 8014 BAYBERRY RD When was the debt incurred? 6/1/2016 Number Street As of the date you file, the claim is: Check all that apply. Contingent **JACKSONVILLE** 32256 Florida Unliquidated State Zip Code City Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Is the claim subject to offset? 001 Collection; Collecting for ORIGINAL CREDITOR: AT T **✓** No Other. Specify Yes G C SERVICES 4.9 \$400.00 Last 4 digits of account number 0473 Nonpriority Creditor's Name 6330 GULFTON ST STE 400 When was the debt incurred? 6/1/2016 Number As of the date you file, the claim is: Check all that apply. Contingent HOUSTON Texas 77081 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? 001 Collection; Collecting for **V** No

Yes

Other. Specify

ORIGINAL CREDITOR: DISH

NETWORK

Case 16-32145 Doc 1 Filed 10/07/16 Entered 10/07/16 14:19:53 Desc Main Document Page 27 of 73

| Debtor | | rroll Case number (if known) | |
|---------|---|---|-------------|
| | First Name Middle Name Las | st Name | |
| Part 2: | Your NONPRIORITY Unsecured Claims - Continu | uation Page | |
| | After listing any entries on this page, number them beginning | g with 4.5, followed by 4.6, and so forth. | Total claim |
| 4.10 | Peoples Gas Nonpriority Creditor's Name | - Last 4 digits of account number | \$2,000.00 |
| | 200 E. Randolph Number Street | When was the debt incurred?n/a | |
| | Trumber Circle | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | Chicago Illinois 60601 | Unliquidated | |
| | City State Zip Code Who incurred the debt? Check one. | Disputed | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | Student loans | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | At least one of the debtors and another | Debts to pension or profit-sharing plans, and other similar | |
| | Check if this claim relates to a community debt | debts | |
| | Is the claim subject to offset? | ✓ Other. Specify <u>utility</u> | |
| | ✓ No | | |
| | Yes | | |
| 4.11 | Speedy Cash Nonpriority Creditor's Name | - Last 4 digits of account number | \$1.00 |
| | 1931 N. Mannheim Rd | When was the debt incurred? n/a | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | Malana Dark Illinois CO4CO | Unliquidated | |
| | Melrose ParkIllinois60160CityStateZip Code | Disputed | |
| | Who incurred the debt? Check one. | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 only | Student loans | |
| | Debtor 2 only | | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | At least one of the debtors and another | Debts to pension or profit-sharing plans, and other similar | |
| | Check if this claim relates to a community debt | debts ✓ Other. Specify notice only | |
| | Is the claim subject to offset? | Outer. Specify House only | |
| | ✓ No | | |

Yes

Case 16-32145 Doc 1 Filed 10/07/16 Entered 10/07/16 14:19:53 Desc Main Document Page 28 of 73

| Deptor i | i <u>Aligeia</u> | | | Carron | Case | Tiuriber (ii known) |
|------------|--|--------------------------------------|---|-----------------------|---------------------|---|
| | First Name | | Middle Name | Last Name | | |
| Part 3: | List Others t | o Be Notified | About a Debt | That You Already I | Listed | |
| col age | llection agency is ency here. Similar | s trying to collectly, if you have n | t from you for a de nore than one cred | ebt you owe to someor | ne else, list the o | ou already listed in Parts 1 or 2. For example, if a original creditor in Parts 1 or 2, then list the collection d in Parts 1 or 2, list the additional creditors here. If our or submit this page. |
| _ | ARRIS & HARRIS | LTD | | On which entry | in Part 1 or Par | t 2 did you list the original creditor? |
| | 1 W JACKSON BL | VD S-400 | | Line 4.1 | of (Check | Part 1: Creditors with Priority Unsecured Claims |
| Nu | umber Street | | | | one): | ✓ Part 2: Creditors with Nonpriority Unsecured Claims |
| Cl | HICAGO | Illinois | 60604 | Last 4 digits of | f account number | er |
| Ci | ity | State | Zip Code | | | |

Case 16-32145 Doc 1 Filed 10/07/16 Entered 10/07/16 14:19:53 Desc Main Document Page 29 of 73

Carroll Debtor 1 Angela Case number (if known) Middle Name Last Name Add the Amounts for Each Type of Unsecured Claim Part 4: Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total claims** \$0.00 Total claims 6a. Domestic support obligations. from Part 1 \$0.00 6b. Taxes and certain other debts you owe the government \$0.00 6c. Claims for death or personal injury while you were intoxicated \$0.00 6d. Other. Add all other priority unsecured claims. Write that amount here. \$0.00 6e. Total. Add lines 6a through 6d. 6e. **Total claims** \$0.00 **Total claims** 6f. Student loans 6f. from Part 2 \$0.00 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims \$0.00 6h. Debts to pension or profit-sharing plans, and other similar 6h. \$22,285.00 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. \$22,285.00 6j. Total. Add lines 6f through 6i. 6j.

Case 16-32145 Doc 1 Filed 10/07/16 Entered 10/07/16 14:19:53 Desc Main Document Page 30 of 73

| Debtor 2 (Spouse, if filing | First Name Midd | lle Name | Last Name | | |
|--|-----------------------------------|------------|-----------------------------|-------------|------------------------------------|
| United States B Case number (If known) | ankruptcy Court for the: Northern | Dist | rict of Illinois (State) | | |
| Official | Form 106G | | | <u> </u> | Check if this is an amended filing |
| Schedu | le G: Executory Co | ntracts an | d Unexp | ired Leases | 12/15 |

1. Do you have any executory contracts or unexpired leases?

- No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
- Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or compan | y with whom you have | the contract or lease | State what the contract or lease is for | | |
|-----|--------------------------|----------------------|-----------------------|--|--|--|
| 2.1 | Feldman, Maureen Name | | - | Other, Other, 1 year residential lease | | |
| | Number | Street | | | | |
| | City | State | Zip Code | | | |

Case 16-32145 Doc 1 Filed 10/07/16 Entered 10/07/16 14:19:53 Desc Main Document Page 31 of 73

| Fill in this inf | ormation to identify your cas | e: | | |
|------------------------------|--|---|--|--|
| Debtor 1 | Angela | | Carroll | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | ling) First Name | Middle Name | Loot Nama | |
| (Opouse, ii ii | iiii9) First Name | Miladie Name | Last Name | |
| United State | s Bankruptcy Court for the: | Northern | District of Illinois | |
| Case numbe | er | | (State) | |
| (If known) | · - | - | | |
| | | | | Check if this is an |
| O((; ·) | | | | amended filing |
| Officia | Form 106H | | | |
| Schedi | ule H: Your Co | odebtors | | 12/15 |
| Yes 2. Within to lidaho, Li | have any codebtors? (If you have any codebtors?) (If you have any code | lived in a community propico, Puerto Rico, Texas, Was | shington, and Wisconsin.) ve with you at the time? | debtor.) community property states and territories include Arizona, California, the name and current address of that person. |
| | Name of your spouse, f | ormer spouse, or legal equiv | valent | _ |
| | Number Street | | | _ |
| | City | State | Zip Code | _ |
| again as | s a codebtor only if that p | erson is a guarantor or co | osigner. Make sure you hav | our spouse is filing with you. List the person shown in line 2 we listed the creditor on <i>Schedule D</i> (Official Form 106D), wile D, Schedule E/F, or Schedule G to fill out Column 2. |

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Official Form 106H Schedule H: Your Codebtors page 1

Column 1: Your codebtor

Case 16-32145 Doc 1 Filed 10/07/16 Entered 10/07/16 14:19:53 Desc Main Document Page 32 of 73

| Fill in this | s information to identify | y your case: | | | | | |
|-----------------------------|---|--|--------------------------------|-------------------|--------------------|------------------------------------|------------------------|
| Debtor 1 | Angela | | Carroll | | _ | | |
| | First Name | Middle Name | Last Name |) | | Check if this is: | |
| Debtor 2 (Spouse, if f | filing) First Name | Middle Name | Last Name | <u> </u> | - | An amended filing | |
| (000000, | ······································ | Middle Name | Lastivarie | ; | | A supplement showing pos | et notition chapter 13 |
| United State | es Bankruptcy Court for the: | Northern | District of Illinois (State | | - | expenses as of the following | |
| Case number | er | | (State | 7) | _ | | |
| (If known) | | | | | | MM / DD / YYYY | |
| Officia | l Form 1061 | | | | | | |
| Sched | lule I: Your Inc | ome | | | | | 12/15 |
| | l pages, write your na | ame and case number | r (if known). A | nswer eve | ry question | | |
| | Fill in your employment | | Debtor 1 | | | Debtor 2 | |
| i | information. | Employment status | ✓ Employed | | | Employed | |
| | If you have more than one job, | | Not Employ | /ed | | Not Employed | |
| | attach a separate page with | 0 | | | | | |
| | information about additional employers. | Occupation | | | | - | |
| | | Employer's name | Dr. Jerome An | tony Office | | | |
| | Include part time, seasonal, or | Employer's address | 327 W 76th St Number Street | | | Number Street | |
| 5 | self-employed work. | | ramsor curec | | | riambol Guodi | |
| | Occupation may include | | | | | | |
| | student or homemaker, if it applies. | | Chinana | III:a a i a | 00000 | | |
| | | | Chicago City | Illinois State | Zip Code | City State | Zip Code |
| | | How long employed there? | 8 months | | | | |
| Estimate | .* | - | ou have nothing to r | eport for any | line, write \$0 in | the space. Include your non-filin | ng spouse unless |
| you are sep If you or yo | • | ore than one employer, combi | ne the information f | or all emplove | ers for that perso | on on the lines below. If you need | d more space, |
| | eparate sheet to this form. | . , , , . | | | ebtor 1 | For Debtor 2 or non-filing spouse | |
| | | ry, and commissions (befor alculate what the monthly wag | | | \$1,518.83 | | |
| 3. Estin | nate and list monthly over | time pay. | 3. | | + \$0.00 | | |

\$1,518.83

4. Calculate gross income. Add line 2 + line 3.

Case 16-32145 Doc 1 Filed 10/07/16 Entered 10/07/16 14:19:53 Desc Main Document Page 33 of 73

| Debtor 1 An | | Jarroll | Case number | (if known) | |
|-----------------------------------|--|----------------------|---------------------------|-----------------------------------|-------------------------|
| FIR | st Name Middle Name L | _ast Name | For Debtor 1 | For Debtor 2 or non-filing spouse | |
| Copy line | 4 here | → 4. | \$1,518.83 | | |
| 5. List all pa | yroll deductions: | | | | |
| 5a. Tax, N | Medicare, and Social Security deductions | 5a | \$0.00 | | |
| 5b. Mand | atory contributions for retirement plans | 5b | \$0.00 | | |
| 5c. Volun | tary contributions for retirement plans | 5c | \$0.00 | | |
| 5d. Requ | ired repayments of retirement fund loans | 5d. | \$0.00 | | |
| 5e. Insur a | ance | 5e. | \$0.00 | | |
| 5f. Dome | stic support obligations | 5f | \$0.00 | | |
| 5g. Unio i | n dues | 5g | \$0.00 | | |
| 5h. Other | deductions. Specify: | 5h. + _ | \$0.00 + | | |
| 6. Add the p +5h. | ayroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + | - 5g 6 | \$0.00 | | |
| 7. Calculate | total monthly take-home pay. Subtract line 6 from line 4. | 7 | \$1,518.8 <u>3</u> | | |
| | ner income regularly received: | | | | |
| busin | ncome from rental property and from operating a less, profession, or farm a a statement for each property and business showing gross | | | | |
| receip | ts, ordinary and necessary business expenses, and the totally net income. | | \$0.00 | | |
| 8b. Intere | est and dividends | 8b | \$0.00 | | |
| deper | y support payments that you, a non-filing spouse, or andent regularly receive | a | | | |
| divorc | e alimony, spousal support, child support, maintenance, e settlement, and property settlement. | 8c | \$0.00 | | |
| | ployment compensation | 8d | \$0.00 | | |
| | I Security | 8e | \$0.00 | | |
| Include assista | government assistance that you regularly receive e cash assistance and the value (if known) of any non-cash ince that you receive, such as food stamps (benefits under pplemental Nutrition Assistance Program) or housing ies | | | | |
| Specify | y: Food Assistance Programs Income | 8f | \$593.00 | | |
| 8g. Pens i | ion or retirement income | 8g | \$0.00 | | |
| 8h. Other | monthly income. Specify: | 8h. + | \$0.00 + | | |
| 9. Add all ot | her income Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8 | h. 9 | \$593.00 | | |
| 10. Calculate Add the e | monthly income. Add line 7 + line 9. ntries in line 10 for Debtor 1 and Debtor 2 or non-filing spou | 10 | \$2,111.83 | = | \$2,111.83 |
| Include co relatives. | other regular contributions to the expenses that you lontributions from an unmarried partner, members of your hould any amounts already included in lines 2-10 or amounts | usehold, your deper | ndents, your roommates | | |
| Specify: | | | | 1 | 11. + \$0.00 |
| | amount in the last column of line 10 to the amount in | | | | 12. \$2,111.83 |
| vville triat | amount on the Summary of Schedules and Statistical Sumr. | nary or Gertain Liab | ninies ariu Reialeu Data, | , іі іі аррііеѕ | Combined monthly income |
| No. | expect an increase or decrease within the year after you | u file this form? | | | monary moonle |
| Yes. | Explain: | | | | |

Case 16-32145 Doc 1 Filed 10/07/16 Entered 10/07/16 14:19:53 Desc Main Document Page 34 of 73

| Fill in this information t | o identify your cas | se: | | | | |
|---|---------------------|---|---|---------------------------|--|------------------|
| Debtor 1 Ange | la | | Carroll | | | |
| First | Name | Middle Name | Last Name | | | |
| Debtor 2 (Spouse, if filing) First | Name | Middle Name | Last Name | Check if this is: | | |
| | | | District of Illinois | An amended filing | - | ala and an 40 |
| United States Bankrup | icy Court for the. | Northern | (State) | expenses as of the | owing post-petition ne following date: | chapter 13 |
| Case number (If known) | | | | <u></u> | | |
| Official For | m 106.J | | | MM / DD / YYYY | , | |
| Schedule J | | cpenses | | | | 12/15 |
| | pace is needed, | | e filing together, both are equally form. On the top of any addition | | | ber |
| Part 1: Describe | Your Househ | old | | | | |
| 1. Is this a joint case | ? | | | | | |
| ✓ No. Go to line | 2 | | | | | |
| Yes. Does De | btor 2 live in a se | eparate household? | | | | |
| ☐ No | | | | | | |
| Yes. | Debtor 2 must file | e Official Forms 106J-2, Expen | ses for Separate Household of Debi | for 2. | | |
| 2. Do you have dependents? | Пи | 0 | | | | |
| Do not list Debtor 1 Debtor 2. | | es. Fill out this information for ach dependent | Dependent's relationship to Debtor 1 or Debtor 2 Child | Dependent's age 18 years | Does depende with you? | nt live |
| | | | Child | 16 years | ✓ Yes. No. ✓ Yes. | |
| | | | Child | 11 years | No. ✓ Yes. | |
| | | | Child | 10 years | No. ✓ Yes. | |
| 3. Do your expenses expenses of peop than yourself and your dependents? | | | | | | |
| Part 2: Estimate | our Ongoing | Monthly Expenses | | | | |
| Estimate your expen | ses as of your b | ankruptcy filing date unless | you are using this form as a suppoplemental Schedule J, check the | - | • | |
| | | cash government assistance t on Schedule I: Your Income | • | | Your | expenses |
| The rental or home any rent for the great for the gre | | oenses for your residence. In | clude first mortgage payments and | | 4. | \$700.00 |
| If not included in | | | | | | |
| 4a. Real estate tax | | ale terrane | | | 4a | \$0.00 |
| 4b. Property, home | | | | | 4b | \$0.00 |
| 4c. Home mainten 4d. Homeowner's | · | | | | 4c | \$0.00 \$0.00 |

Schedule J: Your Expenses

page 1

Official Form 106J

Case 16-32145 Doc 1 Filed 10/07/16 Entered 10/07/16 14:19:53 Desc Main Document Page 35 of 73

Debtor 1

Carroll Angela Case number (if known) First Name Middle Name Last Name Your expenses 5. Additional mortgage payments for your residence, such as home equity loans \$0.00 5. 6. Utilities: 6a. Electricity, heat, natural gas \$0.00 6a. 6b. Water, sewer, garbage collection \$0.00 6b. 6c. Telephone, cell phone, Internet, satellite, and cable services \$150.00 6c. 6d. Other. Specify: \$0.00 6d 7. Food and housekeeping supplies \$800.00 7. 8. Childcare and children's education costs \$0.00 8. 9. Clothing, laundry, and dry cleaning 9. \$50.00 10. Personal care products and services \$50.00 10. 11. Medical and dental expenses \$15.00 11. 12. Transportation. Include gas, maintenance, bus or train fare. \$171.00 12. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books \$0.00 13. 14. Charitable contributions and religious donations \$0.00 14. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance \$0.00 15a 15b. Health insurance \$0.00 15b 15c. Vehicle insurance 15c \$0.00 15d. Other insurance. Specify: ___ 15d \$0.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: \$0.00 16 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a \$0.00 17b. Car payments for Vehicle 2 17b \$0.00 17c. Other. Specify: \$0.00 17c 17d. Other. Specify: \$0.00 17d 18. Your payments of alimony, maintenance, and support that you did not report as deducted from \$0.00 your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. Specify: \$0.00 19. 20.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property \$0.00 20a 20b. Real estate taxes. \$0.00 20h 20c. Property, homeowner's, or renter's insurance \$0.00 20c 20d. Maintenance, repair, and upkeep expenses. \$0.00 20d 20e. Homeowner's association or condominium dues \$0.00 20e

Case 16-32145 Doc 1 Filed 10/07/16 Entered 10/07/16 14:19:53 Desc Main Document Page 36 of 73

| Debtor 1 | Angela | | Carroll | Case number (if known) | | |
|----------|--------------------------|--|------------------------------|------------------------|-----|------------|
| | First Name | Middle Name | Last Name | | | |
| 21.Other | . Specify: | | | | 21 | \$0.00 |
| 00.0-1 | | | | | | |
| | ılate your monthly ex | • | | | | \$1,936.00 |
| | Add lines 4 through 21. | | | | | \$0.00 |
| 22b. C | Copy line 22 (monthly e | expenses for Debtor 2), if any, from | m Official Form 106J-2 | | | \$1,936.00 |
| 22c. A | add line 22a and 22b. T | he result is your monthly expens | ses. | | 22. | |
| 23.Calcu | late your monthly ne | et income. | | | | |
| 23a. C | Copy line 12 (your comb | bined monthly income) from Sch | edule I. | | 23a | \$2,111.83 |
| 23b. C | Copy your monthly expe | enses from line 22 above. | | | 23b | \$1,936.00 |
| 23c. S | Subtract your monthly ex | xpenses from your monthly incor | ne. | | | \$175.83 |
| | The result is your mont | thly net income. | | | 23c | |
| 24 Do vo | ou expect an increase | e or decrease in your expens | es within the year after you | ı file this form? | | |
| | • | | | | | |
| | | t to finish paying for your car loar ase or decrease because of a n | | | | |
| 1 | No | | | | | |
| | ⁄es | | | | | |
| | Explain here: | | | | | |
| | Ехріант пете. | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

Case 16-32145 Doc 1 Filed 10/07/16 Entered 10/07/16 14:19:53 Desc Main Document Page 37 of 73

| Fill in this information to identify your case: | | | | | | |
|---|---------------------------|-------------|------------------------------|--|--|--|
| Debtor 1 | Angela | | Carroll | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse, if filin | g) First Name | Middle Name | Last Name | | | |
| United States B | Bankruptcy Court for the: | Northern | District of Illinois (State) | | | |
| Case number (If known) | | | (State) | | | |

Official Form 106Dec

| Check if this is a |
|--------------------|
| amended filing |

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Par | t1: Sign Below | |
|-----|--|---|
| | Did you pay or agree to pay someone who is NOT an attorney to h | elp you fill out bankruptcy forms? |
| | ✓ No | |
| | Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
| | | |
| | | |
| | Hadar manality of marity of dealars that I have read the assument and | ad pale dules filed with this deployation and |
| | Under penalty of perjury, I declare that I have read the summary arthat they are true and correct. | id schedules med with this declaration and |
| × | /s/ Angela Carroll | × |
| | Signature of Debtor 1 | Signature of Debtor 2 |
| | Date 10/7/2016 | Date |
| | MM/DD/YYYY | MM/DD/YYYY |

Case 16-32145 Doc 1 Filed 10/07/16 Entered 10/07/16 14:19:53 Desc Main Document Page 38 of 73

| | information to identify | your case | 9: | | | | | |
|-----------------------|--|-------------|---------------------|--|---|----------------|-----------|--|
| Debtor 1 | Angela | | | Carroll | | | | |
| Johtor 2 | First Name | | Middle | Name Last Nan | ne | | | |
| Debtor 2 Spouse, i | if filing) First Name | | Middle | Name Last Nan | ne | | | |
| Inited St | ates Bankruptcy Court | for the: | Northern | District of Illino | nis | | | |
| | | | | (Sta | _ | | | |
| Case num If known) | | | | | | | | |
| ٠ | - L C 4 C | 7 | | | | | | Check if this is |
| JITICI | al Form 10 | <u>) /</u> | | | | | | amended filing |
| tate | ment of Fi | nanci | al Affair | s for Individua | als Filing | for Ba | ankruptcy | 12 |
| | hat is your current n Married Not married | | | us and Where You Liv | /ea Betore | | | |
| . Du | uring the last 3 years, | have you | ı lived anywhere | other than where you live | now? | | | |
| | | _ | - | | | | | |
| J | No | | | • | | | | |
| ✓ | | aces you li | ved in the last 3 y | ears. Do not include where y | | | | |
| ✓ | | aces you li | ved in the last 3 y | | | | | |
| | | aces you li | ved in the last 3 y | | | | | Dates Debtor 2 lived there |
| | Yes. List all of the pla | aces you li | ved in the last 3 y | ears. Do not include where y Dates Debtor 1 lived | ou live now. | Debtor 1 | | |
| | Yes. List all of the pla | aces you li | ved in the last 3 y | ears. Do not include where y Dates Debtor 1 lived there | Debtor 2: | Debtor 1 | | there |
| | Yes. List all of the pla | aces you li | ved in the last 3 y | ears. Do not include where y Dates Debtor 1 lived | Debtor 2: | | | there |
| | Yes. List all of the pla | aces you li | ved in the last 3 y | ears. Do not include where y Dates Debtor 1 lived there | Debtor 2: | | | there Same as Debtor 1 |
| | Yes. List all of the plate of t | | | ears. Do not include where y Dates Debtor 1 lived there From | Debtor 2: Same as Number Stree | et | Zin Code | there Same as Debtor 1 From |
| | Yes. List all of the plate of t | aces you li | ved in the last 3 y | ears. Do not include where y Dates Debtor 1 lived there From | Debtor 2: Same as Number Stree | st State | Zip Code | there Same as Debtor 1 From To |
| | Yes. List all of the plate of t | | | ears. Do not include where y Dates Debtor 1 lived there From | Debtor 2: Same as Number Stree | st State | Zip Code | there Same as Debtor 1 From |
| | Yes. List all of the plate of t | | | ears. Do not include where y Dates Debtor 1 lived there From | Debtor 2: Same as Number Stree | State Debtor 1 | Zip Code | there Same as Debtor 1 From To |
| | Yes. List all of the plate of t | | | Pates Debtor 1 lived there From To | Debtor 2: Same as Number Stree City Same as | State Debtor 1 | Zip Code | there Same as Debtor 1 From To Same as Debtor 1 |
| | Yes. List all of the plate of t | | | Prom From From | Debtor 2: Same as Number Stree City Same as | State Debtor 1 | Zip Code | there Same as Debtor 1 From To Same as Debtor 1 From From From |

✓ No

Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

Case 16-32145 Doc 1 Filed 10/07/16 Entered 10/07/16 14:19:53 Desc Main Document Page 39 of 73

| btor 1 Angela First Name Midd | le Name Last N | | umber (if known) | |
|--|--|--|--|---|
| rt 2: Explain the Sources of Your | | | | |
| Did you have any income from employs Fill in the total amount of income you receivactivities. If you are filing a joint case and you have you see and you have you have you are filing a joint case and you have yes. Fill in the details. | ment or from operating a b | nesses, including part-time | - | years? |
| | Debtor 1 | | Debtor 2 | |
| | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| From January 1 of current year until the date you filed for bankruptcy: | ✓ Wages, commissions, bonuses, tips ☐ Operating a business | \$14020.00 | Wages, commissions, bonuses, tips Operating a business | |
| For last calendar year: (January 1 to December 31, 2015) YYYYY | Wages, commissions, bonuses, tips Operating a business | \$16615.00 | Wages, commissions, bonuses, tips Operating a business | |
| For the calendar year before that: (January 1 to December 31, 2014) YYYYY | Wages, commissions, bonuses, tips Operating a business | \$16000.00 | Wages, commissions, bonuses, tips Operating a business | |
| Include income regardless of whether that in benefit payments; pensions; rental income; case and you have income that you received. List each source and the gross income from No Yes. Fill in the details. | interest; dividends; money co d together, list it only once und | ollected from lawsuits; royalties; der Debtor 1. | and gambling and lottery wil | |
| | Debtor 1 | | Debtor 2 | |
| | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) |
| From January 1 of current year until the date you filed for bankruptcy: | LINK | \$5,754.00 | | |
| For last calendar year: (January 1 to December 31, 2015) YYYY | LINK | \$9,132.00 | | |
| For the calendar year before that: (January 1 to December 31, 2014) YYYY | LINK | \$9,132.00 | | |
| | | | | |

Case 16-32145 Doc 1 Filed 10/07/16 Entered 10/07/16 14:19:53 Desc Main Document Page 40 of 73

| | irst Name | | Middle Name | Last Name | Case numb | · · · · · · · · · · · · · · · · · · · | | |
|------------------|---|---------------|-----------------------|--------------------------------|--|---------------------------------------|--|--|
| | | _ | | | | | | |
| 3: Lis | ist Certain | Payment | ts You Made B | efore You Filed for | Bankruptcy | | | |
| re eith | her Debtor 1 | 's or Debto | r 2's debts prima | rily consumer debts? | | | | |
| | | | - | - | | 44.1.1.0.0.0.4.04.(0) | | |
| _ No. | | | , family, or househo | | Consumer debts are defined i | n 11 U.S.C. § 101(8) as "inci | urred by an individual | |
| | During the | 90 days befo | ore you filed for bar | nkruptcy, did you pay any cr | editor a total of \$6,425* or mo | re? | | |
| | No. Go | o to line 7. | | | | | | |
| | Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. | | | | | | | |
| | * Subject to | adjustment | on 4/01/19 and eve | ery 3 years after that for cas | ses filed on or after the date of | fadjustment. | | |
| Yes | s. Debtor 1 o | or Debtor 2 | or both have prir | marily consumer debts. | | | | |
| | During the | 90 days befo | ore you filed for bar | nkruptcy, did you pay any cr | editor a total of \$600 or more? | | | |
| | ✓ No. Go | o to line 7. | | | | | | |
| | | | | | r more and the total amount y rt obligations, such as child s | | | |
| | ; | alimony. Also | o, do not include pa | yments to an attorney for th | is bankruptcy case. | | | |
| | | | | Dates of payment | Total amount paid | Amount you still owe | Was this payment for | |
| Cre | editor's Nam | e | | | | | Mortgage | |
| Nu | ımber Street | | | | | | Car Credit card | |
| | | | | | | | | |
| | | | | | | | Loan repayment Suppliers or | |
| City | ty | State | Zip Code | | | | | |
| | ty reditor's Nam | | Zip Code | | | | Suppliers or vendors Other Mortgage | |
| Cre | editor's Nam | | Zip Code | | | | Suppliers or vendors Other Mortgage Car | |
| Cre | | | Zip Code | | | | Suppliers or vendors Other Mortgage Car Credit card | |
| Cre | editor's Nam | | Zip Code | | | | Suppliers or vendors Other Mortgage Car | |
| Cre | reditor's Nam | | Zip Code | | | | Suppliers or vendors Other Mortgage Car Credit card Loan repayment Suppliers or vendors | |
| Cre | reditor's Nam | e | | | | | Suppliers or vendors Other Mortgage Car Credit card Loan repayment Suppliers or vendors Other | |
| Cre Nu Cit | reditor's Nam | e State | | | | | Suppliers or vendors Other Mortgage Car Credit card Loan repayment Suppliers or vendors Other Mortgage | |
| Cre | reditor's Namumber Street | e State | | | | | Suppliers or vendors Other Mortgage Car Credit card Loan repayment Suppliers or vendors Other | |
| Cre | reditor's Namumber Street ty | e State | | | | | Suppliers or vendors Other Mortgage Car Credit card Loan repayment Suppliers or vendors Other Mortgage Car | |
| Cre | reditor's Nam umber Street ty reditor's Nam umber Street | e State | | | | | Suppliers or vendors Other Mortgage Car Credit card Loan repayment Suppliers or vendors Other Mortgage Car Credit card | |

Case 16-32145 Doc 1 Filed 10/07/16 Entered 10/07/16 14:19:53 Desc Main Document Page 41 of 73

| Debtor | 1 Angela | | | Ca | arroll | Case number (| (if known) |
|-----------------|--|---|---|-------------------------------------|----------------------|--|---|
| | First Name | | Middle Name | | st Name | | |
| Ins co ag | siders include your rporations of which | relatives; ar you are an or a busines | ny general partners officer, director, pe ss you operate as a | relatives of any rson in control, o | r owner of 20% or mo | tnerships of which y ore of their voting se | tho was an insider? you are a general partner; curities; and any managing pmestic support obligations, |
| <u> </u> | No Yes. List all payn | nents to an i | nsider. | | | | |
| | | | | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | City | State | Zip Code | | | | |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | City | State | Zip Code | | | | |
| ins | ithin 1 year before sider? llude payments on o | | | | payments or trans | fer any property o | on account of a debt that benefited an |
| ∠ | No Yes. List all paym | ents that be | nefited an insider. | | | | |
| | | | | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment Include creditor's name |
| | | | | | | | indude deditors name |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | City | State | Zip Code | | | | |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | City | State | Zip Code | | | | |

Case 16-32145 Doc 1 Filed 10/07/16 Entered 10/07/16 14:19:53 Desc Main Document Page 42 of 73

| Deb | tor 1 | | | | Carroll | (| Case number (if | known) | |
|------|--------|--|--|-------------|---------------------------------|---------------------------------|-----------------|----------|---------------------------------------|
| | | First Name | Middle Name | | Last Name | | | | |
| Part | 4: | Identify Legal | Actions, Repossess | sions, a | and Foreclosure | es | | | |
| | List a | | ou filed for bankruptcy, warding personal injury case: | | | | | | ing? or custody modifications, and |
| | | No | _ | | | | | | |
| | Ш | Yes. Fill in the detail | S. | •• • | *** | • | | | 0. |
| | | Coop title | | Nature | of the case | Court or | agency | | Status of the case |
| | | Case title | | | | O a cost Nico | | | Pending |
| | | 0 | | | | Court Nan | ne | | On appeal |
| | | Case number | | | | NumberSt | reet | | Concluded |
| | | | | | | | | | |
| | | | | | | City | State | Zip Code | |
| | | Case title | | | | | | | Pending |
| | | | | | | Court Nan | ne | | On appeal |
| | | Case number | | | | NumberSt | root | | Concluded |
| | | | | | | Numbersi | ieei | | _ |
| | | | | | | <u>C:</u> t. | Ct-t- | 7:- 0 | |
| | | | | | | City | State | Zip Code | |
| | | No. Go to line 11. Yes. Fill in the infor | mation below. | | Describe the prop | erty | | Date | Value of the property |
| | | Creditor's Name | | | | | | | |
| | | Creditor's Name | | | Explain what happ | pened | | | |
| | | Number Street | | | _лр.шастарр | | | | |
| | | Number Officer | | | Property was re | ennssessed | | | |
| | | | | | Property was for | | | | |
| | | | | | Property was g | arnished. | | | |
| | | City | State Zip Code | e | Property was a | ttached, seized, | or levied. | | |
| | | | | | Describe the prop | erty | | Date | Value of the property |
| | | | | | | | | | |
| | | Creditor's Name | | | | | | | |
| | | | | | Explain what happ | pened | | | |
| | | Number Street | | | | | | | |
| | | | | | Property was re | | | | |
| | | | | | Property was for Property was g | | | | |
| | | City | State Zip Code | | | arriisrieu. ttached, seized, | or levied. | | |
| | | , | | - | | ,, | | | |

Case 16-32145 Doc 1 Filed 10/07/16 Entered 10/07/16 14:19:53 Desc Main Document Page 43 of 73

| Deb | tor 1 | Angela First Name | Middle Name | Carroll Last Name | Case number (if known) | - | |
|------|----------|--|-------------|----------------------------|---------------------------------|--------------------------|---------------------|
| 11. | | hin 90 days before you filed f ounts or refuse to make a pay | | | ank or financial institution, s | set off any amou | nts from your |
| | ✓ | No Yes. Fill in the details. | | | | | |
| | | | | Describe the action the | e creditor took | Date action was taken | Amount |
| | | Creditor's Name | | | | | |
| | | Number Street | | Last 4 digits of account n | umber: XXXX- | | |
| | | City State | Zip Code | | | | |
| 12. | | hin 1 year before you filed for ointed receiver, a custodian, | | of your property in the p | oossession of an assignee f | or the benefit of | creditors, a court- |
| | ✓ | No Yes | | | | | |
| Part | | List Certain Gifts and C | | | | | |
| 13. | wi | | | u give any girts with a to | otal value of more than \$600 | per person? | |
| | | Yes. Fill in the details for each Gifts with a total value of m per person | | Describe the gifts | | Dates you gave the gifts | Value |
| | | Person to Whom You Gave the | Gift Gift | | | | |
| | | Number Street | | | | | |
| | | City State Person's relationship to you | Zip Code | | | | |
| | | Person to Whom You Gave the | Gift | | | | |
| | | Number Street | | | | | |
| | | City State Person's relationship to you | Zip Code | | | | |

Case 16-32145 Doc 1 Filed 10/07/16 Entered 10/07/16 14:19:53 Desc Main Document Page 44 of 73

| Debt | tor 1 | Angela | | Carroll | Case number (if known |) | |
|------|----------|-----------------------------------|--------------------------|---|-------------------------------|-----------------------------|--------------------|
| | | First Name | Middle Name | Last Name | | | |
| 14. | Wit | hin 2 years before you filed | l for bankruptcy, did | you give any gifts or contribu | tions with a total value o | f more than \$600 | to any charity? |
| | V | No | | | | | |
| | Ħ | Yes. Fill in the details for each | ch gift or contribution. | | | | |
| | _ | Gifts or contributions to | _ | Describe what you contri | buted | Date you | Value |
| | | that total more than \$600 | | Dodding What you contain | butou | contributed | Value |
| | | | | | | | |
| | | Charity's Name | | - | | | |
| | | | | _ | | | |
| | | | | | | | |
| | | Number Street | | | | | |
| | | | | | | | |
| | | City State | Zip Code | | | | |
| Part | 6. | List Certain Losses | | | | | |
| | | | | | | | |
| 15. | With | nin 1 year before you filed f | or bankruptcy or sin | ice you filed for bankruptcy, d | id you lose anything bec | ause of theft, fire, | other disaster, or |
| | | bling? | | | | | |
| | ✓ | No | | | | | |
| | | Yes. Fill in the details. | | | | | |
| | | Describe the property you | u lost and | Describe any insurance of | coverage for the loss | Date of your | Value of property |
| | | how the loss occurred | | Include the amount that insu | urance has paid. List | loss | lost |
| | | | | pending insurance claims of | on line 33 of <i>Schedule</i> | | |
| | | | | A/B: Property. | | | |
| | | | | | | | |
| Part | | List Certain Payments | - , | | | | |
| | | No Yes. Fill in the details. | petition preparers, or | credit counseling agencies for se | ervices required in your ban | Kiupicy. | |
| | Y | res. I ili ili the details. | | Description and value of | ans near arts | Data naviment | Amount of |
| | | | | Description and value of transferred | any property | Date payment or transfer | Amount of payment |
| | | | | | | was made | p, |
| | | LAW FIRM | | Attorney's Fee - 350.00 | | 10/5/2016 | \$350.00 |
| | | Person Who Was Paid | | | | | |
| | | 20 S. Clark Street | | | | | |
| | | Number Street | | | | | |
| | | 28th Floor | | | | | |
| | | Chicago Illinois | 60603 | | | | |
| | | City State | Zip Code | | | | |
| | | Email or website address | | | | | |
| | | Email of website address | | | | | |
| | | Person Who Made the Payn | nent, if Not You | | | | |
| | | | | | | | |
| | | Person Who Was Paid | | | | | |
| | | - | | | | | |
| | | Number Street | | | | | |
| | | - | | | | | |
| | | - | _ | | | | |
| | | City State | Zip Code | | | | |
| | | Email or website address | | | | | |
| | | ETHALL OF WODULG AUGIESS | | | | | |
| | | Person Who Made the Payn | . 1651 . 57 | · | | | |

Case 16-32145 Doc 1 Filed 10/07/16 Entered 10/07/16 14:19:53 Desc Main Document Page 45 of 73

| Deb | tor 1 | Angela | | Carroll | Case number (if known) |) | |
|-----|----------|---|------------------------|---|----------------------------|--|--------------------------------|
| | | First Name | Middle Name | Last Name | | | |
| 17. | help | hin 1 year before you filed to you deal with your credito not include any payment or tra No Yes. Fill in the details. | rs or to make payments | | our behalf pay or transfer | any property to anyo | one who promised to |
| | ш | res. I ili ili the details. | | | | | |
| | | | | Description and value of a transferred | any property | | Amount of payment |
| | | Person Who Was Paid | | | | | |
| | | Number Street | | | | | |
| | | City State | Zip Code | | | | |
| | | City State | Zip Code | | | | |
| | | Ide both outright transfers and sfers that you have already list No Yes. Fill in the details. | | rity (such as the granting of a | | | o not include gifts and |
| | | | | Description and value of a property transferred | | ny property or eceived or debts paid e | Date d transfer was made |
| | | Person Who Received Tran | sfer | | | | |
| | | Number Street | | | | | |
| | | City State Person's relationship to you | Zip Code | | | | |
| | | Person Who Received Tran | sfer | | | | |
| | | Number Street | | | | | |
| | | City State Person's relationship to you | Zip Code | | | | |
| 19. | | hin 10 years before you file ese are often called asset-pro | | ou transfer any property to a | self-settled trust or simi | lar device of which y | ou are a beneficiary? |
| | ✓ | No Yes. Fill in the details. | | | | | |
| | Ц | res. Fill III the details. | | Description and value of | the property transferred | d | Date transfer was made |
| | | Name of trust | | | | | |

Case 16-32145 Doc 1 Filed 10/07/16 Entered 10/07/16 14:19:53 Desc Main Document Page 46 of 73

| Debtor 1 | 1 Angela First Name Middle Name | Carroll Last Name | Case number (if known) | |
|--------------------|---|---|---|--|
| Part 8: | List Certain Financial Accounts, Ins | | oves and Storage Units | |
| 20. Windows | ithin 1 year before you filed for bankruptcy, we oved, or transferred? clude checking, savings, money market, or other fir | ere any financial accounts or instancial accounts; certificates of depo | truments held in your name, or for your benefit, c | |
| co∈ | operatives, associations, and other financial institu No Yes. Fill in the details. | tions. | | |
| | | Last 4 digits of account number | Type of account or instrument account was closed, sold, moved, or transferred | Last balance before closing or transfer |
| | Person Who Was Paid | - XXXX- | Checking Savings | |
| | Number Street | - | Money market Brokerage Other | |
| | City State Zip Code | - | | |
| | Person Who Was Paid | - XXXX- - | Checking Savings | |
| | Number Street | - | Money market Brokerage | |
| | City State Zip Code | _ | Other | |
| | o you now have, or did you have within 1 year liner valuables? No Yes. Fill in the details. | pefore you filed for bankruptcy, a Who else had access to it? | any safe deposit box or other depository for secu Describe the contents | Do you still |
| | | | | have it? |
| | Name of Financial Institution | Name | | ☐ No |
| | Number Street | Number Street | | _ |
| | | City State Zi | p Code | |
| | City State Zip Code | | | |
| 22. Ha | 4 | ice other than your home within | 1 year before you filed for bankruptcy? | |
| | Yes. Fill in the details. | Who else had access to it? | Describe the contents | Do you still have it? |
| | Name of Storage Facility | Name | | ☐ No ☐ Yes |
| | Number Street | Number Street | | III ies |
| | City State Zip Code | City State Zi | p Code | |

Case 16-32145 Doc 1 Filed 10/07/16 Entered 10/07/16 14:19:53 Desc Main Document Page 47 of 73

| ebtor | | Carr | | | | |
|--------|--|--|--|----------------------------------|---|----------------|
| | First Name Middle Name | | Name | | | |
| t 9: | Identify Property You Hold or Cont | rol for Some | one Else | | | |
| Do | you hold or control any property that some | ono olso owns? l | lnelude anv | proporty you h | porround from are storing for or hold | in truct for |
| | meone. | one else owns : I | include ally | property you i | orrowed from, are storing for, or floid | iii tiust ioi |
| | a Na | | | | | |
| ¥ | No Vos Fill in the details | | | | | |
| _ | Yes. Fill in the details. | Miles and in Alex | | | December the contents | Value |
| | | Where is the | property? | | Describe the contents | Value |
| | Owner's Name | Number Street | t | | | |
| | | | | | | - |
| | Number Street | | | | | |
| | | | | | | |
| | | City | State | Zip Code | | |
| | City State Zip Code | | | | | |
| mt 40 | Cive Details About Environmental | Information | | | | |
| rt 10 | Give Details About Environmental | miormation | | | | |
| or the | purpose of Part 10, the following definitions apply | / : | | | | |
| | Environmental law means any federal, state, or lo | ocal statute or regu | ulation conce | rning pollution, o | contamination, releases of | |
| | hazardous or toxic substances, wastes, or materi | al into the air, land | l, soil, surface | e water, groundw | vater, or other medium, | |
| | including statutes or regulations controlling the c | leanup of these su | ıbstances, w | astes, or materia | al. | |
| • | Site means any location, facility, or property as de | fined under any en | vironmental l | aw, whether you | now own, operate, or utilize it | |
| | or used to own, operate, or utilize it, including dis | sposal sites. | | | | |
| | Llazarda va matarial maana any thing an any irang | | | | | |
| - | Hazardous material means anything an environm | iental law defines a | ıs a hazardou | us waste, hazard | ous substance, | |
| | toxic substance, hazardous material, pollutant, co | | | us waste, hazard | ous substance, | |
| | toxic substance, hazardous material, pollutant, co | ontaminant, or simi | ilar term. | | ous substance, | |
| | · · · · · · · · · · · · · · · · · · · | ontaminant, or simi | ilar term. | | ous substance, | |
| eport | toxic substance, hazardous material, pollutant, co | ontaminant, or simi | ilar term. ess of when t | they occurred. | | ? |
| eport | toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you kn as any governmental unit notified you that yo | ontaminant, or simi | ilar term. ess of when t | they occurred. | | ? |
| eport | toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you kn as any governmental unit notified you that you No | ontaminant, or simi | ilar term. ess of when t | they occurred. | | ? |
| eport | toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you kn as any governmental unit notified you that yo | ontaminant, or simi now about, regardle ou may be liable o | ilar term. ess of when t | they occurred. | or in violation of an environmental law | |
| eport | toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you kn as any governmental unit notified you that you No | ontaminant, or simi | ilar term. ess of when t | they occurred. | | Pate of notice |
| eport | toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you kn as any governmental unit notified you that you No | ontaminant, or simi now about, regardle ou may be liable o | ilar term. ess of when t | they occurred. | or in violation of an environmental law | Date of |
| eport | toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you kn as any governmental unit notified you that you No | ontaminant, or simi now about, regardle ou may be liable o | ilar term. ess of when to protentiall al unit | they occurred. | or in violation of an environmental law | Date of |
| eport | toxic substance, hazardous material, pollutant, coall notices, releases, and proceedings that you know as any governmental unit notified you that you have as any governmental unit notified you that you have a hazardous material has any governmental unit notified you that you have a hazardous material, pollutant, or all notices, releases, and proceedings that you know any governmental unit notified you that you have a hazardous material, pollutant, or all notices, releases, and proceedings that you know any governmental unit notified you that you have | ontaminant, or similation about, regardle ou may be liable of Governmental | ilar term. ess of when the proportion potentially al unit | they occurred. | or in violation of an environmental law | Date of |
| eport | toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you kn as any governmental unit notified you that you No Yes. Fill in the details. | ontaminant, or similion about, regardle ou may be liable of Governmenta | ilar term. ess of when the proportion potentially al unit | they occurred. | or in violation of an environmental law | Date of |
| eport | toxic substance, hazardous material, pollutant, coall notices, releases, and proceedings that you know as any governmental unit notified you that you have as any governmental unit notified you that you have a hazardous material has any governmental unit notified you that you have a hazardous material, pollutant, or all notices, releases, and proceedings that you know any governmental unit notified you that you have a hazardous material, pollutant, or all notices, releases, and proceedings that you know any governmental unit notified you that you have | contaminant, or similation about, regardle ou may be liable of Governmental Governmental Number Street | ilar term. ess of when the state of the stat | they occurred. y liable under o | or in violation of an environmental law | Date of |
| eport | toxic substance, hazardous material, pollutant, coal notices, releases, and proceedings that you know as any governmental unit notified you that you have as any governmental unit notified you that you have as any governmental unit notified you that you have a hour process. Fill in the details. Name of site Number Street | ontaminant, or similation about, regardle ou may be liable of Governmental | ilar term. ess of when the proportion potentially al unit | they occurred. | or in violation of an environmental law | Date of |
| eport | toxic substance, hazardous material, pollutant, coall notices, releases, and proceedings that you know as any governmental unit notified you that you have as any governmental unit notified you that you have a hazardous material has any governmental unit notified you that you have a hazardous material, pollutant, or all notices, releases, and proceedings that you know any governmental unit notified you that you have a hazardous material, pollutant, or all notices, releases, and proceedings that you know any governmental unit notified you that you have | contaminant, or similation about, regardle ou may be liable of Governmental Governmental Number Street | ilar term. ess of when the state of the stat | they occurred. y liable under o | or in violation of an environmental law | Date of |
| eport | toxic substance, hazardous material, pollutant, coall notices, releases, and proceedings that you know as any governmental unit notified you that you have as any governmental unit notified you that you have as any governmental unit notified you that you have as any governmental unit notified you that you have have any governmental unit notified you that you have have any governmental unit notified you that you have have have any governmental unit notified you that you have have have have any governmental unit notified you that you have have have have have have have have | Governmental Number Street City | ilar term. ess of when the state of when the state iller term. The state iller term. | they occurred. y liable under o | or in violation of an environmental law | Date of |
| eport | toxic substance, hazardous material, pollutant, coall notices, releases, and proceedings that you know as any governmental unit notified you that you have as any governmental unit notified you that you have yes. Fill in the details. Name of site Number Street City State Zip Code ave you notified any governmental unit of any | Governmental Number Street City | ilar term. ess of when the state of when the state iller term. The state iller term. | they occurred. y liable under o | or in violation of an environmental law | Date of |
| eport | toxic substance, hazardous material, pollutant, corall notices, releases, and proceedings that you know as any governmental unit notified you that you have as any governmental unit notified you that you have yes. Fill in the details. Name of site Number Street City State Zip Code ave you notified any governmental unit of any notified any notified any governmental unit | Governmental Number Street City | ilar term. ess of when the state of when the state iller term. The state iller term. | they occurred. y liable under o | or in violation of an environmental law | Date of |
| eport | toxic substance, hazardous material, pollutant, coall notices, releases, and proceedings that you know as any governmental unit notified you that you have as any governmental unit notified you that you have yes. Fill in the details. Name of site Number Street City State Zip Code ave you notified any governmental unit of any | Governmental Number Street City | ilar term. ess of when the state of when the state iller term. The state iller term. | they occurred. y liable under o | or in violation of an environmental law | Date of |
| eport | toxic substance, hazardous material, pollutant, corall notices, releases, and proceedings that you know as any governmental unit notified you that you have as any governmental unit notified you that you have yes. Fill in the details. Name of site Number Street City State Zip Code ave you notified any governmental unit of any notified any notified any governmental unit | Governmental Number Street City | ilar term. ess of when the state of t | they occurred. y liable under o | or in violation of an environmental law | Date of notice |
| eport | toxic substance, hazardous material, pollutant, corall notices, releases, and proceedings that you know as any governmental unit notified you that you have as any governmental unit notified you that you have yes. Fill in the details. Name of site Number Street City State Zip Code ave you notified any governmental unit of any notified any notified any governmental unit | Governmental Number Street City | ilar term. ess of when the state of t | they occurred. y liable under o | Environmental law, if you know it | Date of notice |
| eport | toxic substance, hazardous material, pollutant, coall notices, releases, and proceedings that you know as any governmental unit notified you that you have as any governmental unit notified you that you have. Fill in the details. Name of site Number Street City State Zip Code ave you notified any governmental unit of any have you have you notified any governmental unit of any have you have you notified any governmental unit of any have you have you notified any governmental unit of any have you have you notified any governmental unit of any have you have you notified any governmental unit of any have you have you notified any governmental unit of any have you have you not have you have you not have you | Governmental Number Street City Governmental Governmental City | ilar term. ess of when the state unit State rdous mate | they occurred. y liable under o | Environmental law, if you know it | Date of notice |
| eport | toxic substance, hazardous material, pollutant, corall notices, releases, and proceedings that you know as any governmental unit notified you that you have as any governmental unit notified you that you have yes. Fill in the details. Name of site Number Street City State Zip Code ave you notified any governmental unit of any notified any notified any governmental unit | Governmental Number Street City | ilar term. ess of when the state unit State rdous mate | they occurred. y liable under o | Environmental law, if you know it | Date of notice |
| eport | toxic substance, hazardous material, pollutant, coall notices, releases, and proceedings that you know as any governmental unit notified you that you have as any governmental unit notified you that you have. Fill in the details. Name of site Number Street City State Zip Code ave you notified any governmental unit of any have you have you notified any governmental unit of any have you have you notified any governmental unit of any have you have you notified any governmental unit of any have you have you notified any governmental unit of any have you have you notified any governmental unit of any have you have you notified any governmental unit of any have you have you not have you have you not have you | Governmental Number Street City Governmental Governmental City | ilar term. ess of when the state of when the state of when the state of when the state of which will be state of the state | they occurred. y liable under o | Environmental law, if you know it | Date of notice |
| eport | all notices, releases, and proceedings that you know as any governmental unit notified you that you have as any governmental unit notified you that you have you. Fill in the details. Name of site Number Street City State Zip Code ave you notified any governmental unit of any have you not have details. No Yes. Fill in the details. | Governmental Governmental City Governmental Governmental City Governmental Governmental Number Street | ilar term. ess of when the state of when the state of when the state of when the state of which the state of | zip Code | Environmental law, if you know it | Date of notice |
| eport | all notices, releases, and proceedings that you know as any governmental unit notified you that you have as any governmental unit notified you that you have you. Fill in the details. Name of site Number Street City State Zip Code ave you notified any governmental unit of any have you not have details. No Yes. Fill in the details. | Governmental Governmental Governmental Governmental Governmental Governmental Governmental Governmental Governmental | ilar term. ess of when the state of when the state of when the state of when the state of which will be state of the state | they occurred. y liable under o | Environmental law, if you know it | Date of notice |
| eport | all notices, releases, and proceedings that you know as any governmental unit notified you that you have as any governmental unit notified you that you have you. Fill in the details. Name of site Number Street City State Zip Code ave you notified any governmental unit of any have you not have details. No Yes. Fill in the details. | Governmental Governmental City Governmental Governmental City Governmental Governmental Number Street | ilar term. ess of when the state of when the state of when the state of when the state of which the state of | zip Code | Environmental law, if you know it | Date of notice |

Case 16-32145 Doc 1 Filed 10/07/16 Entered 10/07/16 14:19:53 Desc Main Document Page 48 of 73

| Deb | tor 1 | Angela | | | Carroll | Case | e number (if known) | |
|------|--------------|-----------------------|------------------|------------------------|-------------------------------|----------------------|--|--------------------|
| | | First Name | | Middle Name | Last Name | | | |
| 26. | Hav | e you been a party | / in any judici | al or administra | tive proceeding under | any environment | al law? Include settlements and orders | s. |
| | ✓ | No | | | | | | |
| | | Yes. Fill in the deta | ils. | | | | | |
| | | | | • | Court or agency | | Nature of the case | Status of the case |
| | | Case title | | | | | | Donding |
| | | | | | Court Name | | | Pending |
| | | | | | | | | On appeal |
| | | Case number | | | Number Street | | | Concluded |
| | | | | (| City State | Zip Code | | |
| Part | t 11: | Give Details A | bout Your | Business or | Connections to An | y Business | | |
| | | | | | | | | |
| 27. | With | nin 4 years before | you filed for | bankruptcy, did | you own a business or | have any of the f | ollowing connections to any business | ? |
| | | □ A colo proprior | tor or oalf ama | loved in a trade r | profession or other activity | v oithar full time a | r part time | |
| | | | | | profession, or other activit | | r part-time | |
| | | | | company (LLC) | or limited liability partners | snip (LLP) | | |
| | | A partner in a | | | | | | |
| | | _ | - | jing executive of a | • | | | |
| | | An owner of at | t least 5% of th | e voting or equity | securities of a corporation | n | | |
| | | No. None of the ob- | ovo opplica Co | to Dort 12 | | | | |
| | \mathbf{H} | No. None of the abo | | | below for each business | | | |
| | Ш | res. Check all that | appiy above ar | id iiii in the details | | | | |
| | | | | | Describe the natu | re of the busines | | |
| | | | | | | | include Social Security nu | imber or IIIN. |
| | | Business Name | | | _ | | EIN: | |
| | | business mame | | | | | | |
| | | Number Street | | | _ | | Dates business existed | |
| | | ramber enect | | | Name of account | ant or bookkeepe | er | |
| | | City | State | Zip Code | | | From To | |
| | | • | | • | | | | |
| | | | | | | | | |
| | | | | | Describe the net | us of the busines | Employer Identification n | umbar Da nat |
| | | | | | Describe the natu | ire of the busines | Employer Identification n include Social Security nu | |
| | | | | | | | | |
| | | Business Name | | | _ | | EIN: | |
| | | | | | _ | | Detection to the second | |
| | | Number Street | | | Name of account | ant or hookkeens | Dates business existed | |
| | | | | | _ | unit or bookkeept | | |
| | | City | State | Zip Code | | | FromTo | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | Describe the natu | re of the busines | Employer Identification n include Social Security nu | |
| | | | | | | | EIN: | |
| | | Business Name | | | | | | |
| | | Number Street | | | _ | | Dates business existed | |
| | | Mariner Street | | | Name of account | ant or bookkeepe | | |
| | | City | State | Zip Code | | | From To | |
| | | Oity | Sidie | Zip Code | | | | |
| | | | | | | | | |
| | | | | | | | | |

Case 16-32145 Doc 1 Filed 10/07/16 Entered 10/07/16 14:19:53 Desc Main Document Page 49 of 73

| Deb | tor 1 | Angela | | Carroll | Case number (if known) |
|------|------------|--|-------------------------------|------------------------------|---|
| | | First Name | Middle Name | Last Name | |
| 28. | | nin 2 years before yo litors, or other partie | | ı give a financial statemer | nt to anyone about your business? Include all financial institutions, |
| | ✓ | No Yes. Fill in the details b | pelow. | | |
| | | | | Date issued | |
| | | Name | | MM/DD/YYYY | |
| | | Number Street | | | |
| | | City | State Zip Code | | |
| Part | 12- | Sign Below | | | |
| 1 | true a | and correct. I underst ruptcy case can resul | and that making a false state | ment, concealing propert | nts, and I declare under penalty of perjury that the answers are y, or obtaining money or property by fraud in connection with a ears, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | | | gela Carroll | | x |
| | | Signature | of Debtor 1 | | Signature of Debtor 2 |
| | | Date 10/ | 7/2016 | | Date |
| ı | Did y | ou attach additional | pages to Your Statement of F | inancial Affairs for Indivi | duals Filing for Bankruptcy (Official Form 107)? |
| | ✓ N | No | | | |
| İ | Y | es es | | | |
| ı | Did y | ou pay or agree to pa | y someone who is not an atto | orney to help you fill out b | ankruptcy forms? |
| | ✓ N | lo | | | |
| | ☐ Y | es. Name of person | | | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

| | \$245 | filing fee |
|---|-------|--------------------|
| | \$75 | administrative fee |
| + | \$15 | trustee surcharge |
| | \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes:
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft:
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

| | \$1,167 | filing fee |
|---|---------|--------------------|
| + | \$550 | administrative fee |
| | \$1,717 | total fee |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$275 | total fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$200 | filing fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.

Case 16-32145 Doc 1 Filed 10/07/16 Entered 10/07/16 14:19:53 Desc Main Document Page 55 of 73

6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.

Case 16-32145 Doc 1 Filed 10/07/16 Entered 10/07/16 14:19:53 Desc Main Document Page 56 of 73

- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

 Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services. However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00 For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00

Case 16-32145 Doc 1 Filed 10/07/16 Entered 10/07/16 14:19:53 Desc Main Document Page 58 of 73

- 3. Before signing this agreement, the attorney has received, \$350.00 toward the flat fee, leaving a balance due of \$3,650.00; and \$61.76 for expenses, leaving a balance due of \$4,021.76
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Debtor(| (s) | Attorney for Debtor(s) | |
|----------|-------------|------------------------|--|
| | | /s/ Angie Harb | |
| /s/ Ange | ela Carroll | | |
| Signed: | | | |
| Date: | 10/7/2016 | | |

Do not sign if the fee amounts at top of this page are blank.

Case 16-32145 Doc 1 Filed 10/07/16 Entered 10/07/16 14:19:53 Desc Main Document Page 59 of 73

B 203 (12/94)

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| | | Northern Distr | | |
|-----------|---|----------------------------|---|---------------------------------|
| n re - | Angela Carroll Debtor | | Case No. | (If known) |
| | Debtor | | Chapter | Chapter 13 |
| | DISCLOSURE OF | COMPENSATIO | N OF ATTORNEY F | OR DEBTOR |
| 1. | Pursuant to 11 U.S.C. § 329(a) and that compensation paid to me within services rendered or to be rendered is as follows: | one year before the filing | g of the petition in bankruptcy, or | agreed to be paid to me, for |
| | For legal services, I have agreed to | accept | | \$4,000.0 |
| | Prior to the filing of this statement I | have received | | \$350.0 |
| | Balance Due | | | \$3,650.0 |
| 2. | The source of the compensation pai | d to me was: | | |
| | Debtor | Other (specif | ý) | |
| 3. | The source of the compensation pai | id to me is: | | |
| | Debtor | Other (specif | fy) | |
| 4. | I have not agreed to share the amembers and associates of my | | ation with any other person unles | ss they are |
| | | aw firm. A copy of the ag | n with a other person or persons v reement, together with a list of th | |
| 5. | In return for the above-disclosed fer a. Analysis of the debtor's finan- bankruptcy; | _ | r legal service for all aspects of the ing advice to the debtor in determ | |
| | b. Preparation and filing of any | petition, schedules, state | ements of affairs and plan which r | may be required; |
| | c. Representation of the debtor | at the meeting of credito | rs and confirmation hearing, and a | any adjourned hearings thereof; |
| | d. Representation of the debtor | in adversary proceeding | s and other contested bankruptcy | matters; |
| 6. | By agreement with the debtor(s), the | e above-disclosed fee do | es not include the following service | ces: |
| | | | | |
| | | CERTIFIC | CATION | |
| | I certify that the foregoing is a complete debtor(s) in this bankruptcy proceed | | eement or arrangement for payme | ent to me for representation |
| | 10/7/2016 | | /s/ Angie Harb | |
| | Date | | Signature of Attorney | |
| | _ | | Semrad Law Firm | |
| | | | Name of law firm | |

Case 16-32145 Doc 1 Filed 10/07/16 Entered 10/07/16 14:19:53 Desc Main Document Page 60 of 73

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | Carroll, Angela | Case No | | |
|--------|--|------------------------------------|---|-----|
| _ | Debtor(s) | 0000110. | | _ |
| | | Chapter. | Chapter13 | _ |
| | VERIFICATION | N OF CREDITOR MAT | RIX | |
| | The above named Debtors hereby verify that the a | attached list of creditors is true | e and correct to the best of their knowle | dge |
| Date: | 10/7/2016 | /s/ Carroll, Ang | ela | |
| | | Carroll, Angela Signature of De | | _ |

ENHANCED RECOVERY CO L 8014 BAYBERRY RD JACKSONVILLE, FL 32256

DIVERSIFIED Po Box 1391 Southgate , MI 48195

CONVERGENT OUTSOURCING 800 SW 39TH ST RENTON , WA 98057

COMMONWEALTH FINANCIAL 245 Main St Scranton , PA 18519

G C SERVICES 6330 GULFTON ST STE 400 HOUSTON , TX 77081

DIVERSIFIED Po Box 1391 Southgate, MI 48195

City of Chicago Parking 121 N. LaSalle St # 107A Chicago , IL 60602

HARRIS & HARRIS LTD 111 W JACKSON BLVD S-400 CHICAGO , IL 60604

ComEd 3 Lincokln Cetre c/o Sabrina Copelan Villa Park , IL 60181

Peoples Gas 200 E. Randolph Chicago , IL 60601

CREDIT ACCEPTANCE PO BOX 513 Southfield , MI 48037

Speedy Cash Po Box 101928 Case 16-32145 Doc 1 Filed 10/07/16 Entered 10/07/16 14:19:53 Desc Main Document Page 62 of 73

Birmingham , AL 35210

B 203 (12/94)

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| n re | Angela Carroll | | Case No. | |
|-------|---|--|--|---|
| • | Debtor | | ### And the section of the section o | (If known) |
| | | | Chapter | Chapter 13 |
| | DISCLOSURE OF | COMPENSATION | OF ATTORNEY FO | R DEBTOR |
| 1. | Pursuant to 11 U.S.C. § 329(a) and that compensation paid to me withis services rendered or to be rendered is as follows: | in one vear before the filing of | f the petition in bankruptcy, or a | agreed to be naid to me for |
| | For legal services, I have agreed to | o accept | | \$4,000.00 |
| | Prior to the filing of this statement | I have received | | \$350.00 |
| | Balance Due | | | \$3,650.00 |
| 2. | The source of the compensation pa | iid to me was: | | |
| | ✓ Debtor | Other (specify) | | |
| 3. | The source of the compensation pa | nid to me is: | | |
| | Debtor | Other (specify) | | |
| 4. | I have not agreed to share the members and associates of my | above-disclosed compensatio y law firm. | on with any other person unless | they are |
| | I have agreed to share the above members or associates of my I the people sharing in the compe | law firm. A copy of the agreer | th a other person or persons whent, together with a list of the | no are not names of |
| 5. | In return for the above-disclosed fe a. Analysis of the debtor's finar bankruptcy; | e, I have agreed to render legacial situation, and rendering a | gal service for all aspects of the advice to the debtor in determin | e bankruptcy case, including: ning whether to file a petition in |
| | b. Preparation and filing of any | petition, schedules, statemer | nts of affairs and plan which ma | ay be required; |
| | c. Representation of the debtor | r at the meeting of creditors ar | nd confirmation hearing, and ar | ny adjourned hearings thereof; |
| | d. Representation of the debtor | r in adversary proceedings an | d other contested bankruptcy r | natters; |
| 6. | By agreement with the debtor(s), the | e above-disclosed fee does n | ot include the following service | s: |
| | | | | |
| | | CERTIFICATION | ON | |
| of th | certify that the foregoing is a comple e debtor(s) in this bankruptcy procee | ete statement of any agreeme edings. | ent or arrangement for paymen | t to me for representation |
| | 10/4/2016 | · · · · · · · · · · · · · · · · · · · | /s/ Angie Harb | |
| | Date | | Signature of Attorney | |
| | _ | | Semrad Law Firm | |
| | | 1400000 | Name of law firm | |

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to

6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.

- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

 Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services. However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. Improper conduct by the attorney. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing,
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00 For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00 For all of the services outlined above, the attorney will be paid a flat fee of

Case 16-32145 Doc 1 Filed 10/07/16 Entered 10/07/16 14:19:53 Desc Main Document Page 68 of 73

- 3. Before signing this agreement, the attorney has received, \$350.00 toward the flat fee, leaving a balance due of \$3,650.00; and \$61.76 for expenses, leaving a balance due of \$4,021.76
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Date: | 10/4/2016 | ·· | | |
|----------|-------------|--------|------------------------|--|
| Signed: | | | 7 | |
| /s/ Ange | ela Carroll | Larest | / | |
| | | | /s/ Angie Harb | |
| Debtor(s | s) | | Attorney for Debtor(s) | |

Do not sign if the fee amounts at top of this page are blank.

Case 16-32145 Doc 1 Filed 10/07/16 Entered 10/07/16 14:19:53 Desc Main Document Page 69 of 73

| Riddia Atama | Carroll | Case number (if kno | own) | |
|---|---|---|---|--|
| | | | 7000000 | |
| 16a. Are your debts prim 101(8) as "incurred b No. Go to line 16 Yes. Go to line 17 16b. Are your debts prim obtain money for a bu investment. No. Go to line 166 Yes. Go to line 17 | arily consumer de y an individual primo. 7. arily business debusiness or investme | arily for a personal, f ots? <i>Business debts</i> and or through the ope | amily, or household purpose." are debts that you incurred to eration of the business or | |
| Yes. I am filing under Chapte | r 7. Do you estimate that | after any exempt property insecured creditors? | is excluded and administrative expenses are | |
| ☑ 1-49 □ 50-99 □ 100-199 □ 200-999 | 5,001-1 | 0,000 | ☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than 100,000 | |
| ☑ \$0-\$50,000 ☐ \$50,001-\$100,000 ☐ \$100,001-\$500,000 ☐ \$500,001-\$1 million | ☐ \$10,000 ☐ \$50,000 | ,001-\$50 million ,001-\$100 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion | |
| \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | ☐ \$10,000 ☐ \$50,000 | ,001-\$50 million ,001-\$100 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion | |
| For you I have examined this petition, and I declare under penalty of perjury that the information and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under 11,12, or 13 of title 11, United States Code. I understand the relief available under each of choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an at me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 34 I request relief in accordance with the chapter of title 11, United States Code, specified in I understand making a false statement, concealing property, or obtaining money or proper connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Is Angela Carroll Signature of Debtor 1 Executed on | | | | |
| | 16a. Are your debts prim 101(8) as "incurred b No. Go to line 16i Yes. Go to line 17i 16b. Are your debts prim obtain money for a businvestment. No. Go to line 16i Yes. Go to line 16i Yes. Go to line 17i 16c. State the type of debt No. I am not filing under Chapter paid that funds will be a No. Yes. No. Yes. 100-199 200-999 100-199 200-999 250-\$50,000 \$50,001-\$100,000 \$500,001-\$100,000 \$500,001-\$100,000 \$500,001-\$100,000 \$500,001-\$100,000 \$500,001-\$100,000 \$100,001-\$500,000 \$100,001-\$500,000 \$100,001-\$100,000 | uestions for Reporting Purposes 16a. Are your debts primarily consumer de 101(8) as "incurred by an individual prim No. Go to line 16b. ☑ Yes. Go to line 17. 16b. Are your debts primarily business det obtain money for a business or investme investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are ☑ No. I am not filing under Chapter 7. Go to line 18. ☐ Yes. I am filing under Chapter 7. Do you estimate that paid that funds will be available to distribute to under the paid that funds will be available to distribute to under t | Last Name Last Name Last Name Last Name Last Name 16a. Are your debts primarily consumer debts? Consumer debts 101(8) as "incurred by an individual primarily for a personal, for No. Go to line 16b. ☑ Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts obtain money for a business or investment or through the open investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts ☑ No. I am not filing under Chapter 7. Go to line 18. ☐ Yes. I am filing under Chapter 7. Do you estimate that after any exempt property paid that funds will be available to distribute to unsecured creditors? ☐ No. ☐ Yes. ☑ 1-49 ☐ 1.000-5,000 ☐ 50-99 ☐ 100-199 ☐ 100-199 ☐ 100-199 ☐ 350,001-\$100,000 ☐ \$50,001-\$100,000 ☐ \$50,001-\$100,000 ☐ \$50,000,001-\$500 million ☐ \$50,001-\$100,000 ☐ \$50,001-\$100,000 ☐ \$50,001-\$100,000 ☐ \$50,001-\$100,000 ☐ \$50,001-\$100,000 ☐ \$50,001-\$100,000 ☐ \$50,001-\$100,000 ☐ \$50,001-\$100,000 ☐ \$50,001-\$100 million ☐ \$500,001-\$10 million ☐ \$100,001-\$500 million ☐ \$100,001-\$500 million ☐ \$100,001-\$500 million ☐ \$100,001-\$10 million ☐ \$100,001-\$500 million ☐ \$100,001-\$10 million | |

Case 16-32145 Doc 1 Filed 10/07/16 Entered 10/07/16 14:19:53 Desc Main Document Page 70 of 73

| Filkin this inf | ormation to identify your ca | | | |
|----------------------------------|---------------------------------------|-------------------------------|--|--|
| | | | | |
| Debtor 1 | Angela First Name | Middle Name | Carroll | ··· |
| Debtor 2 | r not raine | wiodie ryame | Last Name | |
| | ing) First Name | Middle Name | Last Name | |
| United States | Bankruptcy Court for the: | Northern | District of Illinois | |
| | | | (State) | |
| Case number (If known) | · · · · · · · · · · · · · · · · · · · | | | |
| | Form 106De | ******** | | Check if this is an amended filing |
| Declara | ation About a | n Individual De | btor's Sched | dules 12/15 |
| If two married | l people are filing togeth | er, both are equally respons | ible for supplying corre | ect information. |
| Partil: Sig | | eone who is NOT an attorney | v to help you fill out bani | skruptcy forms? |
| ✓ No | | | • | |
| Land Yes. | Name of person | | Attach Bankruptcy Signature (Official F | Petition Preparer's Notice, Declaration, and Form 119). |
| ★ Isl Ange Signature Date 10/4 | la Carroll of Debtor 1 | re that I have read the summa | // x | with this declaration and e of Debtor 2 |
| MN | N/DD/YYYY | | · | M/DD/YYYY |

Case 16-32145 Doc 1 Filed 10/07/16 Entered 10/07/16 14:19:53 Desc Main Document Page 71 of 73

| ebtor 1 | | | | Carroll | Case number (if known) |
|------------------------------------|--|---|---------------------|--|---|
| | First Name | | Middle Name | Last Name | |
| 3. With cred | hin 2 years befor ditors, or other p | re you filed for arties. | r bankruptcy, did y | ou give a financial staten | ent to anyone about your business? Include all financial institution |
| Samuel Samuel | No Yes. Fill in the de | tails below. | | | |
| | | | | Date issued | |
| | Name | | | MM/DD/YYYY | _ |
| | Number Stree | t | | | |
| | City | State | Zip Code | | |
| | | | | | |
| I have true a | and confect I fill | ierziana mari | making a raise sta | itement, concealing prope | ents, and I declare under penalty of perjury that the answers are rty, or obtaining money or property by fraud in connection with a |
| I have true a | e read the answe and correct. I und uptcy case can r | ierziana mari | up to \$250,000, or | itement, concealing prope | ents, and I declare under penalty of perjury that the answers are rty, or obtaining money or property by fraud in connection with a years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| I have true a | e read the answe | result in fines | up to \$250,000, or | itement, concealing prope | ITY Of Objection money or property by found in assessment and the |
| I have true a | e read the answering correct. I und cuptcy case can respect to the second secon | esult in fines | up to \$250,000, or | itement, concealing prope | rty, or obtaining money or property by fraud in connection with a years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| l have true a bankri | e read the answering correct. I under the read the answering correct. I under the read the read the read the answering correct. I under the read the answering correct the read the rea | / Angela Carco | up to \$250,000, or | itement, concealing prope imprisonment for up to 20 | rty, or obtaining money or property by fraud in connection with a years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 2 Date |
| I have true a bankri | read the answer and correct. I under uptcy case can be something of the second | / Angela Carco | up to \$250,000, or | itement, concealing prope imprisonment for up to 20 | rty, or obtaining money or property by fraud in connection with a years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 2 |
| I have true a bankri | read the answer and correct. I under uptcy case can be something of the second | / Angela Carco | up to \$250,000, or | itement, concealing prope imprisonment for up to 20 | rty, or obtaining money or property by fraud in connection with a years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 2 Date |
| I have true a bankri | e read the answered correct. I under the correct of | / Angela Carco | Your Statement of | itement, concealing prope imprisonment for up to 20 | rty, or obtaining money or property by fraud in connection with a years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 2 Date iduals Filing for Bankruptcy (Official Form 107)? |
| Did yo Did yo Did yo No Did yo | read the answered correct. I underuptcy case can result of the second correct of the sec | / Angela Carro I Angela Carro Iture of Debtor 10/4/2016 Inal pages to Y | Your Statement of | internent, concealing proper imprisonment for up to 20 | rty, or obtaining money or property by fraud in connection with a years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 2 Date iduals Filing for Bankruptcy (Official Form 107)? |

Case 16-32145 Doc 1 Filed 10/07/16 Entered 10/07/16 14:19:53 Desc Main Document Page 72 of 73

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| mie. <u> </u> | Debtor(s) | Case No | Case No | | |
|---------------|---|--|----------------------------------|---|--|
| | | Chapter. | Chapter13 | *************************************** | |
| | VERIFICA | TION OF CREDITOR MATI | RIX | | |
| | The above named Debtors hereby verify tha | t the attached list of creditors is true | and correct to the best of their | knowledge. | |
| Date: | 10/4/2016 | /s/ Carroll, Angela Carroll, Angela Signature of Debto | 70 3 | Φ | |

Case 16-32145 Doc 1 Filed 10/07/16 Entered 10/07/16 14:19:53 Desc Main Document Page 73 of 73

| Deb | tor 1 | Angela First Name Middle Name | Carroll | Case number (if known) | |
|--------|------------|--|--|--|-------------|
| 16. | Cal | culate the median family income that applies to | Last Name | | |
| , | | Fill in the state in which you live. | Illinois | | |
| | | Fill in the number of people in your household. | 5 | | |
| | | · · | | | **** |
| | 100. | Fill in the median family income for your state and a To find a list of applicable median income amounts may also be available at the bankruptcy clerk's offic | s, go online using the link spe | cified in the separate instructions for this form. This list | \$95,321.00 |
| 17. | Hov | v do the lines compare? | | | |
| | 17a. | Line 15b is less than or equal to line 16c. On the 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NO | ne top of page 1 of this form, o T fill out <i>Calculation of Dispo</i> | sheck box 1, Disposable income is not determined under sable Income (Official Form 122C-2). | |
| | 17b. | Line 15b is more than line 16c. On the top of part 1325(b)(3). Go to Part 3 and fill out Calcular your current monthly income from line 14 above | ation of Disposable Incom- | 2, Disposable income is determined under 11 U.S.C. § e (Official Form 122C-2). On line 39 of that form, copy | |
| Pan | 3: (| Calculate Your Commitment Period Uni | der 11 U.S.C. §1325(b |)(4) | |
| | | y your total average monthly income from line 1 | the contract of the contract o | | \$2,223.83 |
| 19. | Ded com | uct the marital adjustment if it applies. If you are mitment period under 11 U.S.C. § 1325(b)(4) allows y | e married, your spouse is not you to deduct part of your spo | filing with you, and you contend that calculating the use's income, copy the amount from line 13. | |
| | 19a. | If the marital adjustment does not apply, fill in 0 on li | ne 19a. | | -\$0.00 |
| | 19b. | Subtract line 19a from line 18. | | | \$2,223.83 |
| 20. | Calc | ulate your current monthly income for the year. | Follow these steps: | | |
| | 20a. | Copy line 19b. | | | \$2,223.83 |
| | | Multiply by 12 (the number of months in a year). | | | x 12 |
| | 20b. | The result is your current monthly income for the ye | ar for this part of the form. | | \$26,685,96 |
| | 20c. | Copy the median family income for your state and si | ze of household from line 16c | | \$95,321.00 |
| 21. | How | do the lines compare? | | | <u> </u> |
| | V | ine 20b is less than line 20c. Unless otherwise order period is 3 years, Go to Part 4. | red by the court, on the top of | page 1 of this form, check box 3, The commitment | |
| | [] | ine 20b is more than or equal to line 20c. Unless oth commitment period is 5 years. Go to Part 4. | nerwise ordered by the court, o | on the top of page 1 of this form, check box 4, The | |
| Zajit. | k S | ign Below | | | |
| | 1 | By signing here, I declare under penalty of perjury that | at the information on this state | ment and in any attachments is too and source. | |
| | | ★ /s/ Angela Carroll Signature of Debtor 1 | () 00 () () () () () () () () (| <u> </u> | |
| | | Signature of Debtor 1 | pigr | ature of Debtor 2 | |
| | | Date 10/4/2016 MM/DD/YYYY | Date | MM/DD/YYYY | |
| | I 1 | f you checked 17a, do NOT fill out or file Form 122C f you checked 17b, fill out Form 122C-2 and file it with | -2. n this form. On line 39 of that t | orm, copy your current monthly income from line 14 abov | ve. |